

APPLICATION FORM FOR RIDER LICENCE

(As Per New UCI Rules Regulated)

Old Rider Licence No. Year

Name of Rider Father' Name

Date of Birth Nationality Sex

Profession Income

Address

Name of State/Board to which Rider belongs to

Affix your
latest Passport
Size
Photograph
here and attach
one for Rider
License

I hereby declared that the Date of Birth given by me is correct to the best of my knowledge. **In support of My Date of Birth, I am enclosing herewith the following documents: -**

- a) Certificate from Birth & Death Registrar.**
- b) Certificate from Sarpanch of my village Panchayte. (In case of Person Born in Village)**

I hereby undertake to respect the Constitution and Regulations of the International Cycling Union (UCI), Continental Confederations and Cycling Federation of India(CFI). I shall participate in cycling competitions or events in a fair and sporting manner.

Further I understand that serious accidents occasionally occur during bicycle racing and that participants in cycling events occasionally stain mortal of serious personal injuries and/or property damages as a consequence there of. I hereby waive, release and discharge any and all claims for damages, for death, personal injury or property damage which I may have or which may hereafter accrue to me, as a result of my participation in the cycle event.

I accept to comply with and to be bound by the UCI anti-doping regulations, the World Anti-Doping code and its International Standards to which the UCI anti-doping regulations refer as well as the anti-doping regulations of the other competent instances as foreseen by the UCI Regulations and the World Anti-Doping Code, provided such regulations comply with the World Anti-Doping Code.

I agree that all urine samples taken shall become the property of the UCI which may have them analyzed, especially for purposes of health protection research and information.

I accept the conditions regarding blood testing and accept to undergo blood tests.

Countersigned

Signature of Applicant

**To be Signed only by President/Secretary of the State/Units only
With Office Seal**