

# Bike Race Series (BRS) - Rider Registration Form

## Personal Information

First Name:

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Last Name:

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Street Address:

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City:

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Postal Code:

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Country:

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Date of Birth (DD/MM/YYYY):

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Age:

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## Gender:

☐ Female

☐ Male

☐ Other

☐ Prefer not to say

## Contact Information

Mobile Phone:

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Email Address:

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## Club Membership (if applicable)

☐ UCI-Affiliated National Federation

☐ British Cycling

☐ Fédération Française de Cyclisme

☐ Federació Catalana de Ciclisme

☐ Other: \_\_\_\_\_

☐ None

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## Previous Competitive Cycling Experience

- ☐ None
- ☐ Local Trail/Community Races
- ☐ Enduro/Downhill Regional Events
- ☐ Cross-Country (XCO)
- ☐ One Season
- ☐ Two or More Seasons
- ☐ Elite/UCI-licensed Rider

## Cycling License

- ☐ None
- ☐ National Federation License
- ☐ UCI License

License Number (if applicable):

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## Emergency Contact

Name:

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Relationship:

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Phone Number:

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## Rider Agreement

I agree to abide by all rules and safety regulations of the Bike Race Series (BRS). I understand that mountain biking is inherently dangerous and involves the risk of serious injury or death. I acknowledge that it is my responsibility to ensure my equipment is safe and that I ride within my abilities.

By signing below, I waive all liability and indemnify BRS, its organizers, volunteers, affiliates, and the

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race venues from any claims or damages arising from participation in the series.

Rider's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian Signature (if under 18): \_\_\_\_\_