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2009 Apparel/ Sponsor Apparel Design Registration Form

RIDER NAME: _____

CLUB _____ LICENCE NUMBER: _____

ADDRESS: _____ POSTCODE _____

PHONE : _____

RIDER'S SIGNATURE: _____

SPONSOR/ COMPANY NAME _____

ADDRESS: _____ POSTCODE _____

PHONE : _____

SPONSOR'S SIGNATURE: _____

PLEASE ATTACH A PHOTOGRAPH / DIGITAL IMAGE OF CLOTHING DESIGN.

PLEASE NOTE ALL COMPLETED REGISTRATION FORMS MUST BE RECEIVED IN THE CQ OFFICE NO LATER THAN THE MONDAY PRIOR TO THE RIDERS'S FIRST EVENT IN WHICH HE/ SHE WISHES TO WEAR APPAREL.

All registrations valid until December 31st 2009.

OFFICE USE ONLY

Date Received Processed Approved Yes No