



# TRINIDAD & TOBAGO CYCLING FEDERATION

## Membership Application Form

Name of Applicant:

Address:

Telephone Contact: Home:   
Work:   
Mobile:

Email Address:

Type of Membership:  Ordinary  Life

Date of Application:  /  /  Applicant Signature: \_\_\_\_\_  
DD MM YYYY

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### FOR OFFICIAL USE:

PROPOSER\*:

SECONDER\*:

Date Approved:  /  /   
DD MM YYYY

\*MUST BE A FINANCIAL MEMBER OF THE TTCF

Applicants are required to provide a passport size photo and a copy of a picture Identification (National ID, Passport or Driver's Permit)