



www.LethbridgeBMX.com

2009 Lethbridge Bicycle Motocross Association Membership Application

Member Last Name:	_____	Member First Name:	_____		
Member Birth date:	_____ (copy of birth certificate required for first time members)				
Mailing Address:	_____				
City:	_____	Prov:	_____	Postal Code:	_____
Home Phone:	_____	Work Phone:	_____	Cell:	_____
Email:	_____				
Parent or Guardian name: (riders under 18) Last:	_____	First:	_____		
Address (if different from above):	_____				
City:	_____	Prov:	_____	Postal Code:	_____
Home Phone:	_____	Work Phone:	_____	Cell:	_____
Email:	_____				

Regular Fee: \$60 ____
Add second class for same rider (e.g. Cruiser) additional \$30 ____

All riders require an Alberta Bicycling Association license in addition to the Lethbridge membership. The ABA fee is \$75 for riders born between 1991 and 2009 and \$95 for riders born before 1991. There is a separate application form for the ABA membership license.

ABA membership application completed? ____

Payment: Cash ____ Cheque # ____ Amount: \$ ____

Signature: _____ Date: _____

Complete this form (and the ABA registration form if applicable) and bring it to open registration (watch the website or local publications for dates and times) or to the track during any scheduled event.