

TRANSFER FORM

A. If sent with the membership application form at the time of renewal

B. If sent mid-season and rider requires a new licence card

NIL \$50

Send the completed form to Cycling Australia at PO BOX 6310 ALEXANDRIA NSW 2015

APPLICATION FOR TRANSFER TO/FROM CLUB OR INTERSTATE

| LICENCE NUMBER: Th | his form must be forwarded to your state office for approval | |
|--|--|------------|
| Surname: | First Name: | |
| Address: | Suburb: | Post Code: |
| Phone (H):(M): | (W): | DOB:/ |
| Email: | | |
| TRANSFER DETAILS | | |
| MEMBER TO COMPLETE – Request for Transfer | | |
| I request a clearance from: (Pr | | |
| To join: | New Cycling Club) | |
| Member Signature: | | |
| PREVIOUS CLUB TO COMPLETE – Approval of Transfe | r CLUB: | |
| Name (must be club official): Position held: | | |
| NEW CLUB TO COMPLETE – Mid season transfer only | CLUB: | |
| Name (must be club official): Position held: | | |
| STATE TO COMPLETE – State Acceptance of Transfer | STATE ASSOCIATION: | |
| Name: | | |
| Position held: | | |
| I hereby confirm that I wish to transfer cycling clubs and I understand that I must submit my current licence and pay the \$50.00 fee which must be sent directly to Cycling Australia before this can be processed. | | |
| Please select: | Credit Card Details: | |
| ☐ No fee payable for transfer at time of renewal | Card Number:/ | |
| \$50.00 transfer fee mid season – please complete credit details | Expiry Date: / Ty Name on Card: | |