

# Membership or Renewal Form

## Team Member 1

Last Name/Surname & First Name :

Address :

Telephone number (including country code) :

Birthdate (day/month/year) :

Email :

Club & Federation if applicable :

## Team Member 2

Last Name/Surname & First Name :

Address :

Telephone number (including country code) :

Birthdate (day/month/year) :

Email :

Club & Federation if applicable :

## Tandem Make & Model :

Optional information for the booklet. You can decide your availability when contacted by TCF members.

Circle the letter(s) of your choice.

A (assistance) Contact us if you are in need and we will help you all we can.

C (meal) If you are in our area, we can offer you a meal.

T (housing) We can offer you a bed for one night if you are passing by our area.

Please send this form and your check of **35 euros** to :

Amicale Cyclo Tandémiste - Tandem Club de France  
22 rue de la Croix Julia  
37390 La Membrolle sur Choisille  
FRANCE