

EVENT LICENCE APPLICATION FORM
 for June 26, 27 and 28, 2009

The race is sanctioned by the Quebec Federation of Cycle Sports (FQSC) and they require all racers to have a valid license. However, it is possible to purchase an event license for \$20, see details below.

QUEBEC RESIDENTS

They will be covered for civil liabilities and accident insurance.

CANADIAN RESIDENTS

The FQSC can supply a license to Canadians not residing in Quebec. All Canadians will be covered for civil liabilities and accident insurance at the same level as a Quebec resident.

AMERICAN RESIDENTS

Residents of the United States may purchase the event license only if they possess a valid domestic license (US). The event license will cover their civil liabilities during the event **but does not offer any accident insurance coverage.**

IT IS IMPORTANT THAT EACH RACER CARRY PERSONAL ACCIDENT/HEALTH INSURANCE.

RESIDENTS FROM OUTSIDE CANADA or the UNITED STATES

The FQSC **cannot issue and event license** for anyone not resident in Canada or the U.S. Those living outside these two countries must hold a valid INTERNATIONAL LICENSE to participate.

The Coupe des Amériques

Last Name _____ First Name _____

Address _____
 No Street Town
 Province Country Zip Code

Phone () _____ Gender : M F

E-mail _____ Date of Birth : ____ / ____ / ____ (DD-MM-YY)

Nationality _____ Cycling Club _____

**This is an Event Licence that allows you to race in
 the Coupe des Amériques**

Cost : 20\$

Acknowledgement of safety regulations and participation rules

I, the undersigned, recognize that participating in a race comprises inherent risks and dangers that may lead to accidents resulting in damages and injuries. I declare that I am familiar with the extent of these risks and dangers and that I accept them freely and voluntarily. I declare that I am familiar with the safety regulations of the Fédération québécoise des sports cyclistes and participation rules of the Coupe des Amériques and that I will abide by them;

and I have signed in _____ this _____ 2009 Signature : _____

To use by FQSC :

Registraire de course	Nom :		
Reçu le :	Lieu :	Montant :	Mode : Chèque ou Cash