



## Group Ride Participation List

Please add your name, mobile and emergency contact details

If you are not a Cycling UK (CTC) member please indicate below  
to ensure that you're covered by CTC insurance during the ride.

Non-members are permitted to attend up to 3 rides before joining

DATE: DD/MM/20YY RIDE DESTINATION: ..... APPROX. DISTANCE: .....

RIDE INFORMATION: .....

RIDE LEADER: Name: ..... Mobile: .....

R/L EMERGENCY CONTACT: Name: ..... Tel.: .....

Ride leaders: Destroy this form after use. Retain ONLY if there is a reportable incident.

	Name Mobile Telephone Number	Member ?	Emergency Contact Name Telephone Number
2	.....	Y/N	.....
3	.....	Y/N	.....
4	.....	Y/N	.....
5	.....	Y/N	.....
6	.....	Y/N	.....
7	.....	Y/N	.....
8	.....	Y/N	.....
9	.....	Y/N	.....
10	.....	Y/N	.....
11	.....	Y/N	.....
12	.....	Y/N	.....
13	.....	Y/N	.....
14	.....	Y/N	.....
15	.....	Y/N	.....
16	.....	Y/N	.....

The information on this form will be used only for contact on the ride. Unless required to support an Incident Report Form it will be destroyed after use.



	Name Mobile Telephone Number	Member ?	Emergency Contact Name Telephone Number
17		Y/N	
18		Y/N	
19		Y/N	
20		Y/N	
21		Y/N	
22		Y/N	
23		Y/N	
24		Y/N	
25		Y/N	
26		Y/N	
27		Y/N	
28		Y/N	
29		Y/N	
30		Y/N	
31		Y/N	
32		Y/N	
33		Y/N	
34		Y/N	
35		Y/N	

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