

## Course Application Form and Candidate Profile

To attend a Level 2 Ride Leadership Award Route Planning Course please complete this form (in block capitals) and return it to the address at the end of the form. For further help and advice before you make a booking, please contact British Cycling's Recreation team. This information will be used by British Cycling to support the development of cycling as well as being passed onto a third party who will use your details to register and communicate with you on the British Cycling and Sky led ride programme. It will also be shared with the course tutors to enable them to provide quality courses and support for all candidates. **\* Mandatory information**

**PLEASE ALLOW 14 DAYS FOR YOUR APPLICATION TO BE PROCESSED**

### Course Details\*

| Location | Dates | Ref |
|----------|-------|-----|
|          |       |     |

### Personal Details (see note 1)

Title:  \*First Name:  \*Surname:

\*Gender: (please tick)  Female  Male \*Date of Birth:

British Cycling Membership No.:  Expiry Date:  Membership Class:  (ie Ride, Race Silver/Gold)

\*Postal Address:   
\*Postcode:

\*Contact telephone number – you must provide **at least one** contact number, preferably a number that you can be contacted on during the day

Tel No. (home):  Tel No. (work):

Mobile:  Email:

### Sky Ride Local 2010 – British Cycling Route Planning Team

For Sky Ride Local in 2010, British Cycling are looking to work with a team of 4-5 qualified route planners per city to review, design, map and risk assess all the routes to be used for the Sky Ride Local programme. This is in response to feedback from 2009 with regards to increasing and utilising ride leader skills and local knowledge of the area. For guidance, time and commitment will be required particularly during the March-May period (estimated 3 days per route planner) with appropriate remuneration available. If you want to be considered to be part of this team in your city please complete the following questions:

I am applying to be part of the British Cycling Route Planning Team and understand the time and commitment estimated that will be required *(please tick)*:

**Best City Area Knowledge** *(please tick one)*:

North  South  Central   
 East  West

**Usage / Experience of using Memory Map**

*(please tick one)*:

Never Used / No experience   
 Limited Usage / Limited experience   
 Frequent Usage / Some experience   
 Regular Usage / Highly experienced

*Please provide any further details or experience with regards to route planning:*

**Please return this application form and prerequisite documentation to:**

Recreation Education, British Cycling, Stuart Street, Manchester, M11 4DQ

**Tel:** 0161 274 2063

**Email:** recreation@britishcycling.org.uk