

# Errigal Cycling Club

I \_\_\_\_\_ The Parent / Guardian of

\_\_\_\_\_

Permit pictures to be taken of the child or children named above.

Has the named child or Children previously attended a cycling course with Errigal Cycling Club

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	_____
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	_____
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	_____

Tea Shirt Size.

3 - 4	<input type="checkbox"/>
5 - 6	<input type="checkbox"/>
7 - 8	<input type="checkbox"/>
9 - 11	<input type="checkbox"/>
12 - 13	<input type="checkbox"/>