

OFFICIAL ENROLMENT FORM TO 2024 ROAD RACES

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This enrolment form is esta	blished between (the Organ	ser):						
	Tour de l'Abitibi		Class:	2.Ncup				
Official organising body:	Tour cycliste de l'Abitibi inc.		Category:	MJ				
Country:	CANADA		Start (dd/mm/yy):	15/07/24				
			End (dd/mm/yy):	21/07/24				
and (the Team):								
Name of the Team:								
Paying agent:			(to be filled in by the Tea	m)				
The Organiser and the Team Riders per team:	n have agreed the following:							
In accordance with article 1.	2.075; the allowance to be p	aid to the Team shall be (amoun	t):					
Other agreement(s) betwee	en the Organiser and the Tea	m:						
- the agreement (o) between								
Any payment will be made t	o the Paying agent of the Te	am in accordance with articles 1.	2.076 and 2.2.009.					
Where required, the Team v	vill issue an invoice to the Or	ganiser at the following billing ac	dress (to be filled in b	ov the Organiser):				
Billing entity:		g		,				
Address:			-					
Address:			_					
		City						
Zip Code:		City:Country:						
		country.						
Both the Organiser and the	Team undertake to respect	the UCI Regulations.						
At least 60 days in advance, t	=	am (In the case of national, region	al or club teams, the c	organiser shall notify the				
At least 50 days before the radecline the invitation.	ace, the invited Team shall info	orm the Organiser in writing wheth	er it wishes to particip	pate in the race or wishes to				
At least 40 days before the ra	ace, the Organiser shall send t	nis official UCI enrolment form (<u>dul</u>	ly completed and sign	ed) to the invited Team.				
At least 20 days before the race, the Team shall return to the organiser the original of the duly completed enrolment form (page 1 signed and page 2 completed).								
72 hours before the event's start time, the Team must send the enrolment form giving the names of the titulars plus two substitutes (page 2).								
At the latest 15 minutes before the team managers' meeting, the sport director of the Team must confirm the identity of the riders who will be starting to the commissaires' panel, by signing the enrolment form (page 2) - art. 1.2.090.								
Remember: Any party failing t	to meet the prescribed deadlin	es shall forfeit its rights.						
Date:			Date:					
			Place:					
Place:								
Last name and First name	and and		Last name and First nam					
•	aniser):		Last name and First nam (authorised signatory fo					
Last name and First name	aniser):							
Last name and First name	aniser):							



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	Event:	Tour de l'Abitibi			Classification:	2.Ncup
	Official organising body:	Tour cycliste de l'Abitibi inc.				
	Country:	CANADA			Riders per team:	
	Start date (dd/mm/yy):	15/07/24	_			
	End date (dd/mm/yy):	21/07/24	_	Name of the Team:		
	Titular Riders*			Nationality:		
	Last name	First name	Nationality	Date of birth	UCLID	
1	Eust name	That name	(trigram)	(DD/MM/YYYY)	(11 numbers)	
2						
3						
4						
5						
6						
7						
_	Substitute riders (max 50%)*					
2						
3						
4						
	Titular Sports Director on the eve	nt				
	Last name	First name	Nationality	UCLID	Mobile phone	Email
1	2000 1101110		(trigram)	(11 numbers)	moone phone	
	Sport Director(s) on the event		Nationality	UCLID		
	Last name	First name	(trigram)	(11 numbers)	Mobile phone	Email
1						
2						
	Other staff on the avent /machan					
_	Other stan on the event (mechan	ics, medical assistants, etc.)	Nationality	LICUD		
	Last name	ics, medical assistants, etc.) First name	Nationality (trigram)	UCI ID (11 numbers)		Function
1						Function
1 2						Function
1 2 3						Function
1 2						Function
1 2 3						Function
1 2 3 4 5 6						Function
1 2 3 4 5 6 7						Function
1 2 3 4 5 6 7 8						Function
1 2 3 4 5 6 7						Function
1 2 3 4 5 6 7 8 9						Function
1 2 3 4 5 6 7 8 9 10 11 12 13						Function
1 2 3 4 5 6 7 8 9 10 11 12 13						Function
1 2 3 4 5 6 7 8 9 10 11 12 13 14						Function
1 2 3 4 5 6 7 8 9 10 11 12 13						Function
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15						Function
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16						Function
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17						Function
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Last name		(trigram)	(11 numbers)		Function
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	Last name	First name	(trigram)	(11 numbers)	Signature of the titula	Function Function Function Function Function Function
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	* Strike out the names of non-	First name	(trigram)	(11 numbers)	Signature of the titula during the race, <u>at the ri</u>	r Sports Director in charge of the Team
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	* Strike out the names of non-	First name	(trigram)	(11 numbers)		r Sports Director in charge of the Team