

Team Dayton New Member Application

Version #2 8/28/10



Name: _____

Street Address/Apt#: _____

City/Town/State/Zip: _____

Phone: _____

Email: _____

Male/Female: _____ DOB: _____ Age: _____

Profession: _____ Employer: _____

USA Cycling License (y/n): _____ Category _____ Expiration Date: _____

- 1) Why do you want to join Team Dayton?

- 2) What do you have to offer back to Team Dayton?

- 3) Why do you believe you will be a good teammate?

- 4) What is your cycling background/experience? (attach race resume if applicable)

- 5) Are there any current member(s) who you have ridden with or know?