



Applicant Personal Information

Full Name: _____

Gender: _____ D.O.B and Age _____

Address: _____

City

Post Code

Phone*: _____ Email _____

*Would you like to be added to the S France riders Whatsapp group who wish train together? YES NO

Have you been a C4C rider previously? YES NO If Yes, what year? : _____

Profession: _____ Company / Boat Name _____

Emergency Contact Details

Full Name: _____ Relationship: _____

Address: _____

City

Post Code

Phone: _____ Email _____

Ride Distance

There are two choices of distance you can choose from yet the sponsorship donation is **€5000** for either option.

Option 1 – MAASTRICH TO ANTIBES – 9 DAYS

Option 2 – GENEVA TO ANTIBES - 5 DAYS

Sponsor Details (If known at this time)

Contact Name: _____ Company: _____

Email Address: _____ Phone: _____

Address: _____

Other Comments: _____

