



Bicycle Rider Permission Form
GRADES 3-5 ONLY 2009-2010

To: Mr. Mike Parman, Principal

From: (Parent Name) : _____

Regarding: (Student Name) : _____
Riding a bicycle to and from school.

- I give my permission for my child to ride his/her bicycle to and from school.
- I take responsibility for my child once he/she is off school property.
- My child is responsible for parking and locking the bicycle at the bicycle racks provided.
- I understand the school is not responsible for lost or stolen bicycles.
- In addition, each child MUST WEAR PROTECTIVE HEAD GEAR. IF NO HEAD GEAR IS PRESENT THE CHILD WILL CALL A PARENT TO PROVIDE PROPER TRANSPORTATION.

Parent signature

date

*** This request is in effect for the period of one school year and must be completed yearly for each student who wishes to ride a bicycle.