



**Broadstone Middle School  
Cycling Permission Request Form**



<b>Child's Name</b>		<b>Form</b>	
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I request permission for my child to cycle to school. I will endeavour to ensure that the following conditions are upheld:

- My child will ride to and from school in a safe and responsible manner
- My child will wear a bicycle helmet at all times
- My child's bicycle will be maintained on a regular basis, including lights
- My child will disembark their bicycle upon entering the school grounds
- My child will lock their bicycle securely in the bike rack area

Should a child be found to have an unsafe bicycle or be guilty of dangerous cycling, permission will be withdrawn. Please note that we cannot accept responsibility for damage or thefts whilst parked in the school cycle racks.

I confirm my child has completed a Bikeability/Cycling Proficiency course and will provide their certificate if requested.

Signed: \_\_\_\_\_ (Pupil)

Signed: \_\_\_\_\_ (Parent/Carer) Date: \_\_\_\_\_

<b>To be completed by the Head of Year or Key Stage</b>	
The cycling permission request outlined above [ <input type="checkbox"/> ] has been granted [ <input type="checkbox"/> ] has not been granted	
Signed _____	Dated: _____

**A copy of this form will be held in school and the original will be returned to the parent/carer making the request.**