

***CYCLING TO SCHOOL***

Please read the following information outlining the schools approach to cycling to school. Our cycle sheds are just inside the main school gates and bicycles and scooters are left at the owner’s risk. The school does not accept liability for lost or stolen property.

**While we at Wallace Fields Junior School wish to encourage the opportunities to gain fitness and independence that cycling to school provides, the decision as to whether your child is competent to negotiate the hazards that might be met, on both the outward and return journeys, must be yours alone. WFJS does not accept any liability for any consequences of, and arising from, that decision.**

It is important that we know the numbers of children cycling to school even if on an infrequent basis, so that we can make adequate security and safety arrangements. If you wish your son/daughter to cycle to school would you please complete the form below.

Parents are advised to take out appropriate insurance as the school’s insurance does not cover loss or damage to cycles whilst they are here.

**CONDITIONS FOR CYCLING TO SCHOOL**

1. All bicycles must be in roadworthy condition.
2. Cyclists must ride sensibly and follow the Highway Code.
3. Children must have a Bikeability Training Certificate or must be accompanied by their parent / carer.
4. All cycles must be provided with a lock and secured in the designated parking areas.
5. The bicycle must be wheeled into the school grounds.
6. All cyclists must wear a cycle helmet whilst cycling to and from school.

WFJS reserves the right to revoke this permit if these conditions are ignored or broken. Please sign and return the information below.

Name of Pupil: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cycle Make, Model and colour: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cycle serial no: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Padlock serial no: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Features:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I accept the above conditions and request permission to be given cycle parking space at school.

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