



**I WANT TO RIDE MY BIKE**  
DB  
.co.uk

Childs name: .....

Date of Birth: .....

Does your child have special educational, behavioural, medical or physical needs? (If yes, please give details)

.....  
.....

<b>My child is... (please tick one)</b>	Very Confident Can signal easily	Average for their age

<b>My child's bike has</b>	Pumped up tyres	Working Brakes
<b>Please tick</b>		

I consent to my child receiving National Standard cycle training. I have read the notes provided.

Signed ..... Date .....

Print Name and relation to child.....