



Milford School - Cyclist Declaration Form

Name: _____ Room : _____ D.O.B _____

The above named cyclist has agreed to the following terms and conditions:

- The cyclist is a Year 5/6 student or if younger then accompanied by an adult.
- The cyclist will wear a fluro vest and a well-maintained, standards-approved helmet when riding.
- The cycle helmet will be adjusted correctly and securely fastened.
- The bicycle will be stored in the bike/scooter stand.
- The cyclist will take full responsibility parking their scooter/cycle correctly.
- The student and parent/caregiver will maintain the cycle in accordance with the manufacturer's instructions.
- Cycles will be walked in and out of the school grounds and when crossing the road. .
- Impromptu checks of helmet and vest wearing will be completed throughout the year by the Travel Wise Team.
- The Principal reserves the right to revoke the privilege of cycling to/from school if deemed necessary. Parents/caregivers will be informed accordingly.
- **For the purpose of this declaration form a cyclist rides a bike or a scooter.**

Cyclist signature: _____ Date: _____

Parent/caregiver signature: _____ Date: _____

Principal/Deputy Principal signature: _____ Date: _____