

Permit No.



Felpham Community College Bicycle Parking Permit

Cycling to School – Important Notice to Parents

Felpham Community College supports students who wish to walk or cycle to school since it improves their health and fitness, reduces traffic outside the school making conditions safer for everyone and benefits their general development. If you wish your son/daughter to cycle to school, would you please complete the form below. It is important that we know the numbers of children cycling to school even on an irregular basis in order that we can make appropriate security and safety arrangements.

While Felpham Community College wishes to encourage an increase in the number of students cycling to school, the decision as to whether your child is competent to negotiate such hazards as may present themselves on the route from home to school and back must be yours and yours alone. Felpham Community College does not accept liability for any consequences of that decision.

Bicycles stored at school are left at the owner’s risk. Parents are advised to take out appropriate insurance cover as the school’s insurance does not cover loss or damage to bicycles.

Bicycle Helmets

Students should wear a correctly fitted bicycle helmet and use appropriate reflective clothing and bicycle lights when visibility is poor.

We have recently been able to negotiate a 25% discount on bicycle helmets at the Bognor Regis branch of Halfords. To receive the discount you must produce this letter at the time of purchase.

Conditions for Cycling to School

1. Bicycle helmets must be worn.
2. All bicycles must be in a roadworthy condition.
3. Cyclists must ride sensibly and follow the Highway Code.
4. Approved bicycle training should have been undertaken, where available.
5. All bicycles must be locked securely in the approved bicycle parking area.

Felpham Community College reserves the right to revoke this permit in the event that these conditions are not met.

Name of Student..... Tutor group.....

Bicycle make..... Model.....

Bicycle serial no..... Bicycle colour.....

I accept the above conditions and request permission for the above named student to be given access to cycle parking at the school. **Please return completed form to the year office.**

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

Parent/Carer

Print name