BICYCLE REGISTRATION FORM

Information about you:

907#

Last Name, First Name

E-Mail Address

Phone Number

Phone Number

Affiliation

☐ Faculty

☐ Staff

☐ Resident Student

☐ Commuter Student

☐ Other ______________________ (Specify)

Information about your bike:

This is a....

☐ Bicycle

☐ Scooter

☐ Moped

☐ Other ______________________ (Specify)

Serial #

The serial number identifies your bicycle in the event that it is stolen. Look for a number that is stamped into the metal of the bicycle frame. Common locations are on the underside of the frame between the pedals or on the tube between the handle bars and the front fork. If you need help an officer will assist you.

Manufacturer

Model

Frame Style

☐ Women’s

☐ Men’s

Frame Type

☐ Mountain Bike

☐ Hybrid Bike

☐ Street Bike

☐ Other (Specify)___________________________

Color

Unique Features:

Preferred bicycle parking location on campus (You may list more than one, for information purposes only):

I understand that it is the responsibility of all individuals operating a bicycle and/or motorized cycle on campus to read and fully understand the Bicycle and Motorcycle/Cycle Regulations. The regulations can be found at http://police.armstrong.edu/parking.html. Lack of knowledge of these regulations will not be accepted as grounds for dismissal of citations.

Signature ________________________________ Date ________________________________