

Bicycle Registration Form

Campus Safety Department Gordon-Conwell Theological Seminary

Sticker Number

RIDER INFO

Name _____

Address 1 _____

Address 2 _____

Your Signature _____

Today's Date _____

ID Number _____

Mailbox Number _____

Email Address _____

Telephone Number _____

Fill out this form and return the top part to Campus Safety.

You may register more than one bike by filling out extra forms.

If you have questions or need help, contact Campus Safety by telephone at (978) 646-4180, or (978) 836-6798 or email at safety@gcts.edu

Remember, the Massachusetts Bike Helmet Law states: "Any person twelve years of age or younger operating a bicycle or being carried as a passenger on a bicycle on a public way, bicycle path or on any other public right-of-way shall wear a helmet".

BIKE INFO

Bike Manufacturer _____

Bike Model or Type _____

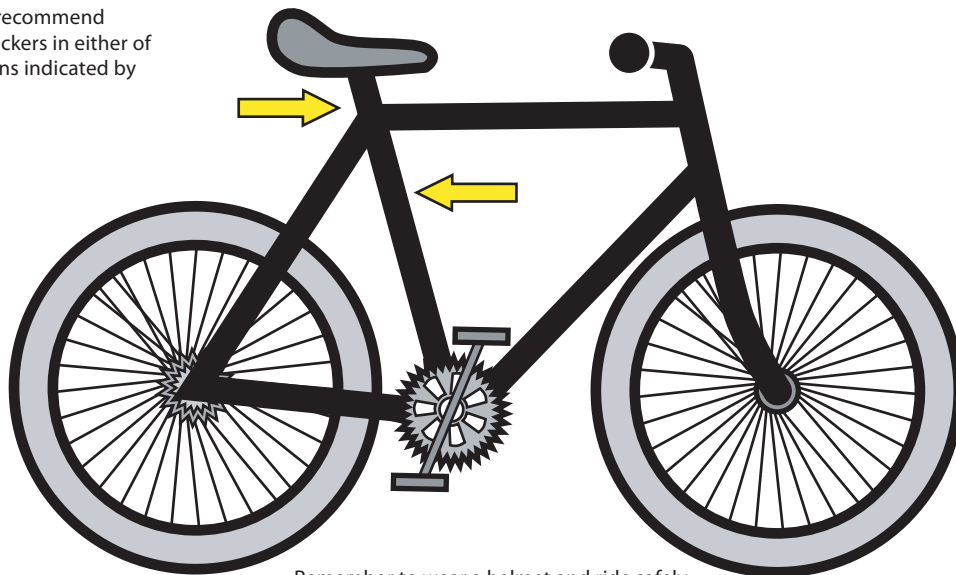
Bike Color _____

Bike Serial Number (If Possible) _____

Cut on the dashed line and return the top portion only to Campus Safety

Where to Put the Bike Stickers

If possible, we recommend placing your stickers in either of the two locations indicated by the arrows.



Remember to wear a helmet and ride safely