

**BETHANY PUBLIC SCHOOL DISTRICT
BICYCLE SAFETY AGREEMENT**

Student Name: _____ Date: _____

Grade: _____ Homeroom Teacher: _____

Make of Bicycle: _____ Bicycle Color: _____

Bicycle Identifying Marks: _____

It is the policy of the Bethany Public School District that all students riding bicycles to and from school MUST wear bicycle helmets as required by Connecticut State Law. Students fourth grade and above may ride their bicycle to school. Students Pre-K through third grade may ride their bicycle to school accompanied by an adult. It is the responsibility of the student's parent/guardian to provide supervision appropriate for the student's age, maturity, and conditions of the chosen route to and from school when riding their bicycle.

Our students are of vital importance to us. Please help keep them safe by educating your child in bicycle and traffic safety so we may ensure the safety of all.

Student Bicycle Rules

1. I will wear a helmet as required by Connecticut State Law.
2. I will obey all stop signs, traffic signals and road safety rules.
3. I will park my bicycle in the bicycle rack on school grounds and secure it with a lock.
4. I will never ride two or more on a bike, stunt or race while on school grounds.
5. I will use both hands to steer my bicycle.
6. I will give pedestrians the right of way on sidewalks and designated crosswalks.
7. I will display courtesy toward drivers of motor vehicles.
8. I will keep my bicycle in good repair.

I give my child permission to ride his/her bicycle to school with the understanding that he/she will follow the student bicycle rules above and that the school administration reserves the right to withdraw my child's bicycle privilege if he/she fails to follow the rules. I understand that the District is not responsible for a lost, stolen, or damaged bicycle and/or safety helmet on school grounds or while riding to/from school.

Parent Name (please print)

Parent Signature

<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	
_____ Signature of Principal or Designee	_____ Date