



BICYCLE CLASS REGISTRATION

Youth Classes

BikePro

ages 10-14 \$75/student
eight hour class

BikePro Junior

ages 7-10 \$40/student
four hour class

Adult Classes

Confident City Cycling –

\$50 for five hour class

Bike Mechanics College –

\$25/class or \$150 for 8 class series

One-on-One Bike Coaching– \$25/person/hour

Class Name: _____ Class Dates: _____

PARTICIPANT INFORMATION

Participant Name: _____

Address/Zip: _____

Home Phone #: (____) _____ Cell Phone #: (____) _____

Email (Please Print): _____ add me to the PedNet email list : YES NO

Age: _____ Sex: M F Grade Level: _____ School: _____

PARENT INFORMATION FOR PARTICIPANTS UNDER 18

Parent or Guardian Name(s): _____

Address/Zip: _____

Home Phone #: (____) _____ Cell Phone #: (____) _____

Email (Please Print): _____

Waiver: I give my child, _____, permission to participate in PedNet's Bicycle Education class. I will not hold the PedNet Coalition or its staff responsible for accidents or injuries.

(Parent/Guardian Signature) (Date)

PAYMENT INFORMATION

Class Fee: _____ Check #: _____ Cash: \$ _____

Amount Contributed to Youth Bicycle Education Scholarship Fee: \$ _____

Return registration form & check to:

PedNet Coalition, c/o Bicycle Education, 501 Fay St., Ste 204, Columbia, MO 65201

Enrollment deadline: Three working days prior to start date.

OFFICE USE ONLY:

Payment Received on (date): _____ Received By: _____ Amount: _____

For more information contact gina@pednet.org or (573)303-1033 or www.pednet.org