

## **ENGADINE PUBLIC SCHOOL**

1A Waratah Road, Engadine NSW 2233 PO Box 42, Engadine NSW 2233 T 9520 8559 F 9548 1186

www.engadine-p.school@det.nsw.edu.au

## **ENGADINE PUBLIC SCHOOL BIKE PASS APPLICATION**

Student Name:	Class: _	
Parents and students need to read sign below to indicate that you have described in the policy. The studen Franke and arrange a time to have	e read, understood and will follow to the track to return this signed ap their bike's roadworthiness inspec	he Code of Behaviour oplication form to Mrs cted.
Make sure that all brakes work correctly and tyres are in good order. A pass may be withheld if a bike is deemed unsafe or needing repairs. Students will need a sturdy lock attached to their bike to secure it at school.		
Briefly describe the route your child crossings that are necessary.	will be taking to and from school in	ncluding all road
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	2/00/00/00/	
Does your child understand that they are required to ride directly to and from school?		YES / NO (Please circle)
I acknowledge that I have read and understood the Engadine Public School Bike and Scooter Policy attached.		YES / NO (Please circle)
I understand a student's bike privileges may be withdrawn if there is a breach in the expected code of behaviour.		YES / NO (Please circle)
Parent Name	Signature	Date:
Student Name	Signature	Date:

