

KAEGERBEIN ELEMENTARY SCHOOL  
Grand Island, New York

PERMISSION FOR BICYCLE RIDING

Child's Name: \_\_\_\_\_

Teacher: \_\_\_\_\_ Grade: \_\_\_\_\_

Date(s) permitted to ride bicycle: \_\_\_\_\_

In signing this form, I grant permission for my child to ride his/her bicycle to and from school. I have reviewed safety rules with my child and have instructed him/her in proper rules of the road. My child understands that in riding on the street, bicycles must ride **WITH** traffic and are subject to the same rules as drivers of automobiles. This includes obeying all traffic signs and signaling intentions through the use of hand signals.

I understand that helmets are to be worn when riding to and from school, and will not allow my child to ride his/her bicycle during inclement weather. Students must also walk their bikes on the school sidewalks. I am also providing a lock to assist in safe guarding the bicycle while it is stored on school property.

I further understand that Kaegebein Elementary School and the Grand Island Central School District will not be held liable for any injury or mishap which may occur in the course of riding to or from school and that responsibility for my child rests with me, the parent, as I am granting permission for my child to ride his/her bicycle to and from school.

Failure to follow safety rules or the instructions of the supervision of the school-assigned parking lot personnel will result in the loss of bicycle riding privileges.

\_\_\_\_\_  
**Signature of Parent/Guardian**

\_\_\_\_\_  
**Date**

*(A copy of this letter will be kept on file in the school office.)*