

LAST NAME: _____

BICYCLE REGISTRATION

DATE OF REGISTRATION: _____ REGISTRATION STICKER # _____

BICYCLE DESCRIPTION:

MAKE _____ MODEL _____ COLOR _____

SERIAL # _____ DECALS, SPECIAL MARKING _____

GEARS/SPEED _____ WHEEL SIZE _____ GIRL/BOY STYLE _____

PEDAL/HAND BRAKES _____ CHAIN GUARD: YES OR NO _____

TYPE OF SEAT _____ TYPE OF HANDLEBAR _____

TYPE OF PEDALS _____

FENDERS: YES OR NO, DESCRIPTION IF YES _____

ANY SPECIAL ACCESSORIES: SPEEDOMETER, BASKETS, LIGHTS,
REFLECTORS, ETC. LIST BELOW:

OWNERS NAME: _____

ADDRESS: _____

TELEPHONE: _____

OTHER CONTACT: _____