BIKE REGISTRATION FORM

PLEASE PRINT CLEARLY

DATE: __________________

Parent’s Name: ___________________________________________________________

Child’s Name: ____________________________________________________________

Address: __________________________________________________________________

Phone: __________________________________________________________________

Bike ☐ or Scooter ☐ Make: ____________________________________________________

Color Frame: _____________ Trim: _______________ Fenders: ________________

Tire Size: ___________________ Tire Type: _________________________

Model: _________________________ Year: _____________________________

Serial Number: ______________________________________________________________

Applied Number: ______________________________________________________________

Please list identifiable characteristics: __________________________________________

______________________________________________________________________________

Remember to practice good prevention measures to insure your bike is not stolen:
✓ Store your bike in a locked garage or shed overnight.
✓ If you leave your bike unattended for any length of time, be sure to lock it up or store it in a safe facility.
✓ When locking your bike, be sure to lock it to an unmovable object and do not leave loose objects with the bike.

In the event your bike is stolen or lost, please file a report with the Washington City Police Department. Be sure to note the make, model, color of your bike and serial number in the report.

Please keep a copy of this form for your records, along with a photo of your bike.

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