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For office use only	
School	
Course number	

## Cycle training consent form

Dear Parent / Guardian

Your child has been invited to join a cycle training course. This consent form must be completed and returned to the school before s/he can take part.

I (full name of parent/guardian):

consent for my child or the following child for whom I take responsibility

(full name of child):

to take lessons in safe, effective cycling and related activities, which may include cycle maintenance

At each lesson, my child will (tick one box\*)  Wear his/her helmet  OR not wear a helmet

\*Trainees must supply and bring their own helmet to EVERY session. If both or no boxes are ticked, you will be deemed to have no preference.

I understand that:

- I must make sure my child's bike is roadworthy. The Instructor may make adjustments and repairs to my child's bike where necessary.
- Cycle Training UK Ltd will not be held liable for any injury which it is established may have been prevented by the wearing of a helmet or any injury which it is later established may have been caused by the wearing of a helmet. The instructor will advise on the fit of a helmet, but will not necessarily be able to judge from its appearance if it is in good condition.
- I will tell Cycle Training UK about any medical condition or special educational needs (SEN) my child has which may affect the training.
- If my child is over eight years old and demonstrates competency, some training will take place on the road
- If my child misses a session it may not be possible for them to rejoin the course.
- I should think about personal accident insurance for my child.
- Having training does not mean that it is safe for my child to cycle or fix a bicycle in all circumstances. To become a proficient cyclist or mechanic takes more practice than lessons of this kind can provide.
- Cycle Training UK Ltd is not responsible for any injury, loss or damage not caused by an instructor, or which happens outside these lessons, including journeys to and from school.

Signed	
Date	
Contact number	
Medical conditions/SEN	

Form: General On-Road School: V3.3