

## Application form for a free refurbished bike

Please fill in this form and return it to: <u>Hsc.brakethecycle@edinburgh.gov.uk</u> There is more information at: <u>Brake the Cycle – The City of Edinburgh Council</u>



| Name:       |  |
|-------------|--|
| Job Title:  |  |
| Address:    |  |
| Contact No: |  |

## Who is the bike for?

| Self-Referral:  |  |
|---|--|
| Organization:<br>(please give name and<br>address)                            |  |
| Person receiving bike:<br>(please give their name and<br>who they are to you) |  |

## Please tick which of the following categories applies (please tick):

| Single parent  | Disabled person                      |  |
|--|--------------------------------------|--|
| Community bike club                                      | Elderly person                       |  |
| Play scheme  | School                               |  |
| After school group                                       | Youth club                           |  |
| Community organization or group                          | Young person's residential unit      |  |
| Person with an allocated social worker or support worker | Person with additional support needs |  |

## Type of bike required:

| Male/Female:            |  |
|-------------------------|--|
| Child/Adult:            |  |
| Height of the person:   |  |
| Preferred type of Bike: |  |