



KETTERING BICYCLE REGISTRATION FORM

Name [Print] _____
First Last

Home Address (City, State and Zip) _____

Phone # Home _____ Cell _____

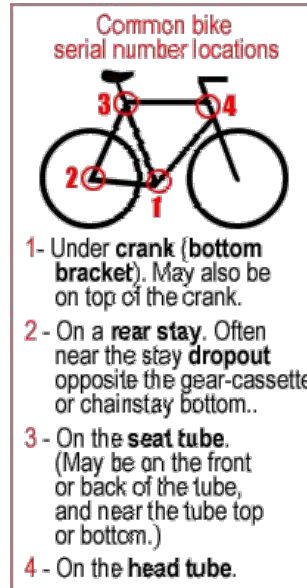
Type of Bike [Please Circle] KIDS, BMX, MOUNTAIN, ROAD, HYBRID, 3-WHEEL, RECUMBENT, OTHER

Manufacture _____

Color [Please Circle] RED, BLUE, BLACK, GREEN, YELLOW, ORANGE, PURPLE, PINK, GRAY, WHITE, MULTI

Frame Size _____

Serial #



Registration process is at the Kettering Government Center, 3600 Shroyer Rd.

Reservations must be made in advance. To reserve a time or for further information please call 296-2520.

Complete the form and bring it with your bicycle to your pre-arranged time. Only bicycles with serial numbers can be registered through the program.

Owner Signature _____

Kettering Registration Sticker # _____
Date of input _____ Initial _____ **OFFICE USE ONLY**