



Bicycle Request Voucher

Please use this voucher or send the information via email to: gatecitybikecoop@gmail.com

I understand that Gate City Bike Co-op will help me with my bike, but all responsibility for its safe maintenance and operation remains with me.

Who is this request for?

Date _____

Signature _____

Printed Name _____ phone _____

Email _____

Street _____

City _____

Are you a Child Teen Adult

What do you need? Bicycle Lock Helmet Lights

Bicycles, locks, lights, and helmets are subject to availability

Will this bike be your only vehicle? _____

Pick up: By appointment, 216 Main Street. Details on making an appointment at <https://gatecitybikecoop.org/get-a-bike>

Agency Approval

Nashua Soup Kitchen

Front Door Agency

Nashua Boys and Girls Club

Harbor Homes

PAL (Police Athletic League)

Approval Signature _____ Date _____

Approval Phone and/or Email _____