

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	s reque	st for?	Date		
Signature					
Printed Name			phone		
Email					
Street					
City					
Are you a	Child	□Teen		lult	
What do you n		•	k 🗆 H	elmet Lights	
Will this bike b	e your onl	y vehicle?			
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https://gatecity	•		Ŭ	an appointment a	
	DIKECOOP.				
Agency Ap	proval				
☐ Nashı	☐ Nashua Soup Kitchen			☐ Front Door Agency	
☐ Nashua Boys and Girls Club				☐ Harbor Homes	
☐ PAL (Police Athletic League)					
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Approval Signature				Da	te
Approval Phor	ne and/or E	-mail			