



## Road Safety Cycle Training Enquiry Form

Please fill either part 1 or 2 of this form:

### Part 1 - Application form for volunteer instructor training

Name:	
Address:	
Telephone Number:	
E-mail:	
School/organisation	
Please enter availability details (i.e. days and times you are able to do the training)	

### Part 2 - Cycle Training enquiry

Name:	
Address:	
Telephone Number:	
E-mail:	
School/organistion	
Please select which course you are interested in by placing (X) in the box:-	
Basic Skills Course	
On-road Cycle Course	
Pathfinders Course	
Please send cycling information	

Thank you for your enquiry. Please send this form via email to the Road Safety email address at: [roadsafety@plymouth.gov.uk](mailto:roadsafety@plymouth.gov.uk)

This email address is checked regularly and we will endeavour to respond within five working days.

Or alternatively post it to us at:

Road Safety Team  
Dept. of Development  
Plymouth City Council  
Civic Centre  
Plymouth  
PL1 2AA