**CLUB APPLICATION FOR CYCLE PARKING**

***Please send your completed form to* Active.Travel@Fingal.ie**

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| **CONTACT DETAILS** | | |
| **Name of Club** |  | |
| **Address** |  | |
| **Club Manager** |  | |
| **Email** |  | |
| **Phone no.** |  | |
| **ABOUT YOUR SPORTS CLUB** | | |
| How many children/adults cycle to your club? (Estimate) | |  |
| How many staff/volunteers are involved with the club? | |  |
| How many cycle stands do you currently have? | |  |
| How many children/adults scoot to your club? (Estimate) | |  |
| Do you have scooter stands? | | Yes / No |
| Have you previously received stands from the National Transport Authority or Fingal County Council? | | Yes / No |
| **CYCLE PARKING** | | |
| **How many cycle stands would you like to apply for?** | | **Number of racks (1 or 2)** |
| 5 hoop Toast Rack – holds 10 bikes  **(Dimensions: 750mm (H) 750mm (W) 3200** **(L)** | |  |

**SIGNED: DATE:**

**\* Please check dimensions of bike racks before applying to ensure that the sizing is suitable for your club as bike racks cannot be collected at a later date.**