**Saughall All Saints C of E Primary School**

**Church Road**

**Saughall**

**Chester**

**CH1 6EP**

Telephone: 01244 981090

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 Headteacher: Mrs. D Prenton

**Dear Parents and Carers,**

We are pleased to inform you that our Year 5 pupils have the opportunity to take part in a **Road Safety Course** provided by **Bikeability** this coming **May**. This valuable course is **free of charge** and will cover both **Level 1 and Level 2** training. For more information please see their website https://www.bikeright.co.uk/bikeability

As part of this inclusive programme, children who do not currently ride or who require equipment will be fully supported - bikes and helmets can be provided at no cost. However, if your child does have their own bike, please ensure it is **roadworthy** and that they bring a **helmet**.

To help us prepare, we kindly ask you to complete and return the attached form to the school office by **8th September.** Please confirm the details requested so we can ensure every child is appropriately accommodated.

Thank you for your support.

**Kind regards,**

Team 5/6

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**Bikeability Road Safety Course – Parent/Carer Response Form**

Please tick the appropriate boxes below and return this form to the school office by **8th September.**

**Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

☐ My child **wishes to take part** in the Bikeability Road Safety Course
☐ My child **does not wish to take part** in the Bikeability Road Safety Course

☐ My child **has a roadworthy bike and helmet**
☐ My child **needs to use a bike and helmet provided by the Bikeability**
☐ My child **is a non-rider** (requires stabilisers or support holding the seat)

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_