

Bike Rental Booking Form



Please complete and return to iCycle reception

Office Use
CRC No:

All Fields Mandatory

Name (Hirer / rider) :

Address :

Address :

Address :

Email Address:

Mobile No: Landline No:

Proofs Taken:

Student ID No Student Email:

Dates / Term and Bike Requirements

Rental Details:

Name: Date hired: Time

iCycle staff member checking out

Bike: Damage/check list completed

Type of bike hired

Return Details:

Name: Date returned: Check sheet: Time:

iCycle staff member checking in Completed Y/N

Special Requirements & Notes

Requested hire period in weeks: (1 week = period of 7 days):

Deposit paid £ Cash/cheque/card

Deposit returned £ Cash/cheque/card

I have read and agree to accept the terms and conditions as set out in iCycle Manchester
HIRE TERMS AND CONDITIONS ATTACHED.

Signed: Date: