

**CRYSTAL LAKE POLICE DEPARTMENT  
BICYCLE LICENSE APPLICATION**

DATE \_\_\_\_\_ NO. \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

MAKE \_\_\_\_\_ SIZE \_\_\_\_\_

SERIAL NO. \_\_\_\_\_ COLOR \_\_\_\_\_

TYPE: BOYS GIRLS TANDEM (CIRCLE ONE)

ACCESSORIES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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