BICYCLE ACCESS COUNCIL

Name: ____________________________
Street Address: ________________________________
City, State: ____________________________
Zip Code: ____________________________ Phone: ( )
Email: ____________________________

**BAC does not share member information with any other organization, retail dealers, or Bike Clubs.**

**Optional:**

How many bikes do you own (actually ride)?

How many miles do you ride per year?

Are you a bicycle commuter?  Yes  No

Do you belong to any local Bike Clubs? (please list) ____________________________

______________________________

Do you belong to any other bicycle related organizations? (for example: LAB, USCF, IMBA)

Your age: ____________________________ remember this is optional, but it helps BAC

I do  ☐ do not  ☐ own a motor vehicle.

What do you think can be done to improve bicycling on Pennsylvania roadways?

______________________________

______________________________

______________________________

Use back if more space is needed.

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**For BAC use only**

Annual Membership to begin on ____________________________

$20 membership dues received by ____________________________ cash  check # ____________

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Bicycle Access Council, P.O. Box 92, 465 Dairyland Dr., Dallastown, PA  17313

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Bicycle Access Council is a non-profit organization incorporated in Pennsylvania