Fairfax County Secure Bike Room Membership Application



NOTE: You must be at least 18 years of age to become a member

Application Type (circle one):						
NEW	6 month	1 year	2 year			
RENEWAL	6 month	1 year	2 year			
First Name:						
Last Name:						
Home Street Address:						
City/Town:						
State:						
Zip Code:						
E-mail Address	s:					
Telephone Number (Day):						
Telephone Nur	nber (Night):					
Driver's Licens	se Number:		State:			

Date of Birth:

Bicycle Registration (You can register up to three bicycles but you can only have one bike parked in the room at a time)

	Bicycle 1	Bicycle 2	Bicycle 3		
Bicycle Make:					
Model:					
Color:					
Serial #:					
NOTE: The serial number is optional but recommended					

Fee Schedule:	One Time Application/Processing Fee	\$15.00				
	6-Month Membership	\$40.00				
	Annual Membership (one year)	\$60.00				
	2-Year Membership	\$100.00				
Checks should be made payable to Fairfax County						

Questions, comments, suggestions...contact the Fairfax County Department of Transportation Secure Bicycle Parking Program staff at (703) 877-5600, TTY 711, or email us at: BikeFairfax@fairfaxcounty.gov

This section for FCDOT use only

The applicant has agreed to and signed the Membership Agreement

The applicant has submitted the required fees in the amount of \$_____

The membership lease begins on: ______through: ______

Access Key Fob #:_____

Bicycle Registration #: _____

FCDOT 04/2022 S1