

# ***Application for the Use of Program Trailer***

---

**Name of School/Organization:**

---

**Address of Event:**

---

**Name of School system (*if applicable*):**

---

**Name of Contact Person (*who will use the equipment*):**

---

**Phone:**

**Cell:**

**Email:**

---

**Best Way to Contact You:**

---

**Requested Dates for Trailer:**

---

**Approx. Total # off Kids Who Will Receive Ped. And Bike Safety Lessons:\_\_\_\_\_**

**# of Kids in Pedestrian Class: \_\_\_\_\_ # of Kids in Bicycle Class:\_\_\_\_\_**

---

**Will the Trailer be Left at Your School/Location? Y\_\_\_\_\_ N\_\_\_\_\_**

**If YES, Please Specify the Exact Location the Trailer Should be Left at Delivery:**

---

**Date and Time You Would Like to Have the Trailer Delivered (*by a certain time if you will not be there to meet it*):**

---

**Date and Time You Will Leave the Trailer With Keys Locked Inside, Ready For Pick Up:**

---

**Teachers Personal Contact Phone Number:**

*(This number is for emergency use regarding delivery or pickup. If you don't have a cell phone, please give us a phone number we can use to reach you in case of trouble delivering or picking up. A home number may be best. Your personal phone number will be used only in an emergency)*

---

**\*\*If conditions do not permit trailer remaining at your school, you may remove equipment from it and store this in a secure location in the school for the duration of the classes. Please mark the pre-inventory form with numbers of all items you borrow for this purpose.\*\***

---

**If Needed, Do You Have Secure Storage? Describe.**

---

**Please fax, mail, or email this to: WABA Education Program Coordinator, 2599 Ontario Rd. NW,  
Washington, DC 20009**

**Phone: 202-213-1459 Cell: 202-213-1459 Fax:202-518-0936 Email: safetyed@waba.org**

---

**NOTE: Trailer keys are accessible by unlocking a lockbox on the trailer tailgate. The combination is  
S-H-A**