



Important information for the cycling camp

Destination of the bike tour **Day 1** _____

Meeting location _____ Time: _____

Destination of the bike tour **Day 2** _____

Meeting location _____ Time: _____

Destination of the bike tour **Day 3** _____

Meeting location _____ Time: _____

Destination of the bike tour **Day 4** _____

Meeting location _____ Time: _____

Drop-off point _____ Time: _____

Teacher

Surname/first name

Mobile no. _____

Accompanying persons

Surname/first name

Mobile no. _____

Surname/first name
