



bikestation[®]
C O V I N A

FREE 1 YEAR MEMBERSHIP VALUED AT \$116

REGISTER YOUR BIKE

Brand _____

Model _____

Color _____

Type of Bicycle:

Beach Cruiser

Hybrid

Road

Mountain

Fixed Gear

Recumbant

Other _____

Serial Number _____

MAILING ADDRESS

First Name _____

Last Name _____

Address _____

City _____

State _____ ZIP _____

Phone _____

Email _____

Bikestation
110 W. Ocean Blvd., Suite #19
Long Beach, CA 90802
562.733.0106 telephone
562.733.0107 fax
info@bikestation.com

I WILL REGISTER MY BIKE AT A LATER DATE

