

TICKET YOUR FAMILY

SAFE ROUTES TO SCHOOL

TICKETED NAME		
DATE	TIME	<input type="checkbox"/> AM <input type="checkbox"/> PM
LOCATION		
MUST BE REMINDED TO SET A GOOD EXAMPLE		
ALWAYS TRAVEL SAFELY		

- | | | |
|---|---|--|
| <input type="checkbox"/> DID NOT USE AVAILABLE CROSSWALK | <input type="checkbox"/> DROWSY DRIVING | <input type="checkbox"/> CELL PHONE DISTRACTION |
| <input type="checkbox"/> FOLLOWING VEHICLE TOO CLOSELY | <input type="checkbox"/> AGGRESSIVE DRIVING | <input type="checkbox"/> DID NOT MAKE EYE CONTACT WITH DRIVER BEFORE CROSSING ROAD |
| <input type="checkbox"/> PASSING BIKE TOO CLOSELY | <input type="checkbox"/> UNBUCKLED PASSENGER/DRIVER | <input type="checkbox"/> OTHER DISTRACTION: _____ |
| <input type="checkbox"/> DID NOT WEAR A HELMET WHEN BIKING/RIDING A SCOOTER | <input type="checkbox"/> CROSSED STREET WITHOUT LOOKING BOTH WAYS | <input type="checkbox"/> _____ |
| <input type="checkbox"/> DID NOT USE TURN SIGNAL | <input type="checkbox"/> DID NOT YIELD TO PERSON WALKING | <input type="checkbox"/> _____ |
| <input type="checkbox"/> PASSED SLOWER VEHICLE ON THE RIGHT | <input type="checkbox"/> BLOCKING CROSSWALK | <input type="checkbox"/> _____ |
| | <input type="checkbox"/> BOTH HANDS NOT ON WHEEL | <input type="checkbox"/> _____ |

WHY THIS BEHAVIOR IS UNSAFE _____

WHAT CAN BE DONE NEXT TIME? _____

TICKETED SIGNATURE
ADVOCATE SIGNATURE

ALL ROAD USERS SHARE THE RESPONSIBILITY TO KEEP NORTH CAROLINA'S ROADS SAFE. MAKE SAFE DECISIONS WHEREVER, WHENEVER, AND HOWEVER YOU TRAVEL. TOGETHER, WE CAN SAVE LIVES.

