



# AmTryke Adaptive Tricycle Request Form

(Must be filled out completely by adult rider or parent/guardian)

Recipient's Name: \_\_\_\_\_ Date of Request: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Age: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Phone#: \_\_\_\_\_  
County: \_\_\_\_\_  
Diagnosis: \_\_\_\_\_ Email: \_\_\_\_\_

## If Recipient is Under Age 18

Parent/Guardian Name: \_\_\_\_\_

### If different from above

Mailing Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Secondary Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Treating Therapist's Name: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Do you have a place to store the AmTryke out of the weather?  Yes  No

Do you have a vehicle that will transport your AmTryke?  Yes  No

\* If no, do you have a place to ride the AmTryke?  Yes  No

**Greater Birmingham AMBUCS requires a \$100 donation before we schedule any fittings.**

**Note:** AmTryke adaptive tricycles are distributed based on available funds and need. Individual placements of AmTryke adaptive tricycles are at the discretion of the local chapter.

The AmTrykes cost between \$600 - \$1200; if you can afford a larger donation, it helps us bless more recipients.

Tell Us about the recipient: \_\_\_\_\_  
\_\_\_\_\_

Including a photo of the recipient will help us obtain a sponsor to help you pay for the AmTryke more quickly. Digital images preferred but we also accept professionally printed glossy photos. No photocopies or folded images.

\*By including a photo, you are giving consent for AMBUCS to use the image online and in print to help obtain funding.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Individuals will not be considered for placement until all four forms are returned to AMBUCS: request form and waiver filled out by the recipient/guardian, as well as the Assessment Form and Tryke Selection Form filled out by the therapist.**

Please mail or email completed form to your local chapter:

Birmingham AMBUCS: 1929 Canyon Road, Birmingham, AL 35216 Email: birminghamAmbucs1@gmail.com

This form, Request Form & Liability Waiver Form and Assessment Form must be received before AmTryke placement is considered.

(205) 823-7800  
BirminghamAmbucs.org  
Revised July 2023

# AmTryke Adaptive Tricycle Waiver Form

(Must be filled out completely by adult rider or parent/guardian)

AMBUCS members nationwide are dedicated to creating opportunities for mobility and independence by providing AmTryke adaptive tricycles, offering educational scholarships to therapy students and performing various forms of community service.

**Purpose:** The AmTryke adaptive tricycle creates a feeling of freedom, builds self-esteem, strengthens muscles and improves motor coordination and range of motion—all while making exercise fun.

**Steering:** Initially, the rider may have difficulty turning or changing directions. Encourage the rider to go straight ahead, back up and slowly turn around. On many models there are three steering options for the AmTryke. On the front column of the tricycle, you will find two holes for the steering pin. The top hole is straight steering, the bottom hole allows a 20-degree turning radius. Leaving the pin out gives the rider free steering.

## Safety Cautions

- Fast speeds and sharp turns can cause the AmTryke adaptive tricycle to tip or turn over.
- Always wear a helmet when riding an AmTryke. Use of other protective gear is highly recommended.
- Adult supervision required if used by younger or developmentally delayed riders.
- Use caution near vehicles, swimming pools and other bodies of water, hills, alleys and sloped driveways.
- Always wear shoes.
- Never allow more than one rider.
- Use of the steering pin is recommended to prevent over-steering or possible tip-overs.

*The information contained in this service is not intended nor implied by National AMBUCS™, Inc. to be professional medical advice by National AMBUCS, Inc. Always seek the advice of your physician, therapist or other qualified healthcare provider prior to starting any treatment or with any question you may have regarding a medical condition. Nothing contained in this document is intended by National AMBUCS, Inc. to be for medical diagnosis or treatment by National AMBUCS, Inc. or on behalf of National AMBUCS, Inc.*

*In no event shall National AMBUCS, Inc. be liable for any direct, indirect, incidental, consequential, special, exemplary, punitive, or any other monetary or other damages, personal injury or property damages, fees, fines, costs, attorney fees, or liabilities of any kind arising out of or relating in any way to this service or use of the AmTryke® adaptive tricycle, and/or content or information provided herein.*

I agree that the rider listed on the front of this document may be photographed. I also agree that the photos and recipient's name may be used in promotional efforts for National AMBUCS, AmTryke or the local AMBUCS chapter. I further grant AMBUCS the ability to use the photos and name for advertising/publicity purposes without additional compensation, except where prohibited by law. If anybody in my party does not want to be photographed under these same terms, I will let the photographer know as soon as possible.

**By signing below, I acknowledge that I have read and understood this liability waiver.**

Recipient's Name: \_\_\_\_\_

Adult Recipient Signature: \_\_\_\_\_

**If Recipient is Under Age 18**

Legal Guardian Name: \_\_\_\_\_

Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Individuals will not be considered for placement until all three forms are returned to AMBUCS: this form filled out by the recipient/guardian, as well as the Assessment Form and Tryke Selection Form filled out by the therapist.**

Please mail or email completed form to your local chapter:

Birmingham AMBUCS: 1929 Canyon Road, Birmingham, AL 35216 Email: birminghamAmbucs1@gmail.com

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(205) 823-7800

BirminghamAmbucs.org

Revised July 2023

# AmTryke Evaluation Packet

(Must be filled out completely by therapist or physician)

Thanks for choosing an AmTryke adaptive tricycle! In order to accommodate the widest variety of people, AmTryke offers many tryke models and each can be customized in a variety of ways. Following the steps below will help you choose the perfect tryke for your client from what might seem like a dizzying array of options. Remember you can always refer to our website, [www.birminghamambucs.org](http://www.birminghamambucs.org), or the AmTryke catalogue for more information and product images.

**Step 1:** Fill out the AmTryke Assessment Form.

**Step 2:** Choose the way the tryke will be propelled: **Hand & Foot, Foot, or Hand**. Your choice should be based on the rider's ability and therapy goals.

**Foot trykes** were developed in response to requests from therapists for a traditional tricycle for riders with special needs.

**Hand & Foot trykes** improve coordination, strength and range of motion. Using all four extremities helps with weakness in any area, even general weakness, and can positively affect tone.

**Hand trykes** are designed for persons whose lower limbs lack function or those who need special therapy for the upper extremity.

**Step 3:** Take rider's measurements from the front of this Assessment Form and compare them to our Sizing Chart (the final page of this packet). This will narrow the choices considerably.

**Step 4:** Choose any adaptations and/or accessories needed by the rider. Each tryke model can only be customized in the ways noted in its own model section in the Tryke Selection Forms, or with accessories from the Generic Accessories section. If a customization option is not listed, it is because of design or other practical constraints in offering it on a particular model.

**Note:** The 1416, 1420, and 1420XL Foot Trykes offer two drive possibilities: **fixed** drive or **geared** drive. A **fixed** drive, commonly known as a 'fixie,' works on a mechanical level to help individuals make a full pedal rotation. The foot crank is constantly in motion for full therapeutic effect. Coasting is not possible with a positive drive; when limb motion stops, the bike does as well.

Riders of **geared** drive trykes must be able to make a complete pedal rotation on their own. This tryke is suitable for riders who need help with balance and a stable sitting position and who have the cognitive ability to steer successfully and apply the coaster brake or hand brake. The key feature of geared trykes is the ability to coast. This option is available under the **High Functioning Set Up**.

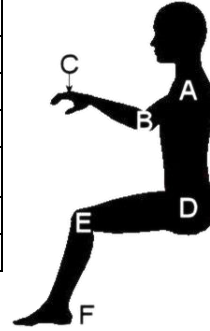
# AmTryke Assessment Form

(Must be filled out completely by therapist or physician)

Recipient's Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Age: \_\_\_\_\_ Weight (lbs.):\* \_\_\_\_\_ Height (inches):\* \_\_\_\_\_  
 Diagnosis(es):\* \_\_\_\_\_

\*This private information is only used to help appropriately fit the rider.

RIDER'S MEASUREMENTS				
<b>Arm Measurements (inches)</b>				<b>Total Length</b>
<b>Left</b>	A to B:		B to C:	
<b>Right</b>	A to B:		B to C:	
<b>Trunk</b>	A to D:			
<b>Leg Measurements (inches)</b>				<b>Total Length</b>
<b>Left</b>	D to E:		E to F:	
<b>Right</b>	D to E:		E to F:	



A	Center of Shoulder
B	Center of Elbow
C	Center of Digit Crease
D	Center of Hip
E	Center of Knee
F	Bottom of Foot

**Arm Length & Leg Length Measurements are critical to correct AmTryke Selection**

Sizing Chart is available online:  
[www.ambucs.org/riders/wish-list/sizing-chart/](http://www.ambucs.org/riders/wish-list/sizing-chart/)

Hip Width: \_\_\_\_\_

Notes on Provided Measurements (if any):

Helmet Sizing	
Size	Measurement (head circumference)
Toddler (XS)	17.7" – 19.3"
Child (S)	20.5" – 21.7"
Youth (L)	20.9" – 22.4"
Adult (XL)	22.4" – 23.6"

Therapist Name: \_\_\_\_\_ Is this the treating therapist?  Yes  No  
 Credentials: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Facility Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Does the recipient have good head control? Yes \_\_\_ No \_\_\_  
 Does the recipient sit without support? Yes \_\_\_ No \_\_\_  
 Does the recipient transfer independently? Yes \_\_\_ No \_\_\_ If not, how much assistance is needed? \_\_\_\_\_  
 Does the recipient stand independently? Yes \_\_\_ No \_\_\_ If not, how much assistance? \_\_\_\_\_  
 Does the recipient walk independently? Yes \_\_\_ No \_\_\_ If not, how much assistance is needed? \_\_\_\_\_  
 Does recipient have muscle tone issues? Yes \_\_\_ No \_\_\_ If yes, please list \_\_\_\_\_  
 Does the recipient have orthopedic concerns? Yes \_\_\_ No \_\_\_ If yes, please list \_\_\_\_\_  
 Does the recipient have sensory needs? Yes \_\_\_ No \_\_\_ If yes, special accommodations needed? \_\_\_\_\_  
 Has the recipient used an adaptive Tryke? Yes \_\_\_ No \_\_\_ If yes, which model and how much assistance was needed? \_\_\_\_\_  
 Any other beneficial information? \_\_\_\_\_

By signing below, you are signifying that in your professional opinion this rider would benefit from an AmTryke. You assume no liability.

**Therapist Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Recipient's Name: \_\_\_\_\_ Date: \_\_\_\_\_

<b>GENERIC ACCESSORIES</b> (not model specific)			
Fun Items	<input type="checkbox"/> License Plate	<input type="checkbox"/> Water Bottle w Cage	
Leg & Foot Items	<input type="checkbox"/> Foot Cups (pair): <input type="checkbox"/> Small <input type="checkbox"/> Medium	<input type="checkbox"/> Knee Adductor Strap	<input type="checkbox"/> Pedal Block (1 = ¾") _____ qty
Hand Items	<input type="checkbox"/> Variable Range of Motion Kit <i>(only for Hand &amp; Foot Cycles)</i>	<input type="checkbox"/> Wrist Wraps (Includes right & left) <input type="checkbox"/> X-Small <input type="checkbox"/> Medium <input type="checkbox"/> Small <input type="checkbox"/> Large	<input type="checkbox"/> Wrist Brace Mitt: <input type="checkbox"/> Right <input type="checkbox"/> Left <input type="checkbox"/> Small <input type="checkbox"/> Medium

## FOOT TRYKES

<input type="checkbox"/> <b>1410 FOOT TRYKE</b> – (10" wheels, fixed drive) <b>50-FC-0100</b> Arm Length 12-20", Leg Length 15-21"	
<b>NEW: Standard with Rear Steering (can convert to push bar) and safety flag</b>	
<input type="checkbox"/> Option #1 – Standard Seating System: Blue Bucket Seat	
<input type="checkbox"/> Option #2 – Alternate Seating System: Snappy Seat System Snappy Seat Accessories: <input type="checkbox"/> Laterals <input type="checkbox"/> Head Rest	
1410 Accessories:	<input type="checkbox"/> Separator Cube <input type="checkbox"/> H-Harness - 11.5"

<input type="checkbox"/> <b>1412 ProSeries FOOT TRYKE</b> (12" wheels, fixed drive) – <b>50-FC-1412</b> Arm Length 16-24", Leg Length 23-28"	
<b>NEW: Standard with Rear Steering (can convert to push bar), Medium Pommel Saddle Seat and safety flag</b>	
<input type="checkbox"/> Option #1 – Standard Seating System: Medium Pommel Saddle Seat/1600 Simple Seatback Seat Bottom Alternates: <input type="checkbox"/> Bench Seat <input type="checkbox"/> Large Pommel Saddle Seat <input type="checkbox"/> Saddle Seat <input type="checkbox"/> Skinny Saddle Seat (8.5x6")	
<input type="checkbox"/> Option #2 – Alternate Seating System: 1400 ProSeries Seat Back System (push grip, backpad, med. pommel & 2 laterals) Seat Bottom Alternates: <input type="checkbox"/> Bench Seat <input type="checkbox"/> Large Pommel Saddle Seat <input type="checkbox"/> Saddle Seat <input type="checkbox"/> Skinny Saddle Seat (8.5x6") Trunk Support Options: <input type="checkbox"/> ProSeries Full Padded Back <input type="checkbox"/> ProSeries Head Rest <input type="checkbox"/> ProSeries Lumbar Pad <input type="checkbox"/> Recumbent 10 Degree Seat Post	
<input type="checkbox"/> Option #3 – Alternate Seating System: Gray Bucket Seat	
<input type="checkbox"/> Option #4 – Alternate Seating System: Snappy Seat System <i>(too small for many 1412 riders; check seat measurements.)</i> Snappy Seat Accessories: <input type="checkbox"/> Head Rest <input type="checkbox"/> Laterals <input type="checkbox"/> Separator Cube	
1412 Accessories:	<input type="checkbox"/> H-Harness - 11.5" <input type="checkbox"/> Knee Separator: <input type="checkbox"/> 2" <input type="checkbox"/> 5" <input type="checkbox"/> 9" Extender Tube <input type="checkbox"/> ½" Exercise Pedals <input type="checkbox"/> Front Hand Brake Kit (cannot be used with Rear Steering) <input type="checkbox"/> ½" Expanding Pedals <input type="checkbox"/> Hi-Rise Handlebars: <input type="checkbox"/> 5" (BMX) <input type="checkbox"/> 8"

<input type="checkbox"/> <b>1416 ProSeries FOOT TRYKE</b> (16" wheels, fixed or freewheel drive) – <b>50-FC-1416</b> Arm Length 16-24", Leg Length 26-32"	
<b>NEW: Standard with Medium Pommel Saddle Seat and safety flag</b>	
<input type="checkbox"/> Option #1 – Standard Seating System: 1400 ProSeries Seat Back System (push grip, backpad, med. pommel & 2 laterals) Seat Bottom Alternates: <input type="checkbox"/> Bench Seat <input type="checkbox"/> Tractor Seat with bracket <input type="checkbox"/> Large Pommel Saddle Seat <input type="checkbox"/> Saddle Seat Trunk Support Options: <input type="checkbox"/> ProSeries Full Padded Back <input type="checkbox"/> ProSeries Head Rest <input type="checkbox"/> ProSeries Lumbar Pad <input type="checkbox"/> Recumbent 10 Degree Seat Post	
<input type="checkbox"/> Option #2 – Alternate Seating System: Medium Pommel Saddle Seat/1600 Simple Seat Back Seat Bottom Alternates: <input type="checkbox"/> Bench Seat <input type="checkbox"/> Tractor Seat with bracket <input type="checkbox"/> Large Pommel Saddle Seat <input type="checkbox"/> Saddle Seat	
<input type="checkbox"/> Option #3 – Alternate Seating System: Gray Bucket Seat	
1416 Accessories:	<input type="checkbox"/> Rear Steering Kit <input type="checkbox"/> Calf & Leg Supports <input type="checkbox"/> 9" extender tube <input type="checkbox"/> H-Harness - 11.5" <input type="checkbox"/> Hi-Rise Handlebars: <input type="checkbox"/> 8" <input type="checkbox"/> 12" <input type="checkbox"/> ½" Exercise Pedals <input type="checkbox"/> Knee Separator: <input type="checkbox"/> 2" <input type="checkbox"/> 5"









Recipient's Name: \_\_\_\_\_ Date: \_\_\_\_\_

<input type="checkbox"/> <b>AM-16 HAND TRYKE</b> (16" wheels & 5" crank arms) <b>50-HFC-0411</b> Arm length 18-27" <b>New: Now standard with Rear Steering (converts to push bar by inserting pin) and safety flag.</b>
<input type="checkbox"/> <b>AM-16 HAND-FOOT TRYKE</b> (16" wheels & 5" crank arms) <b>50-HFC-0411</b> Arm length 18-27", leg length 24-36" <b>New: Now standard with Rear Steering (converts to push bar by inserting pin) and safety flag.</b>
<input type="checkbox"/> Option #1 – Standard Seating System: Saddle Seat/1600 Simple Seat Back Seat Bottom Alternates: <input type="checkbox"/> Bench Seat <input type="checkbox"/> Tractor Seat <input type="checkbox"/> Pommel Saddle Seat <input type="checkbox"/> Medium (11.5x10") <input type="checkbox"/> Large(14x13")
<input type="checkbox"/> Option #2 – Upgraded Seating System: 1400 ProSeries Seat Back System (push grip, backpad, saddle seat & 2 laterals) Seat Bottom Upgrades: <input type="checkbox"/> Bench Seat <input type="checkbox"/> Tractor Seat <input type="checkbox"/> Pommel Saddle Seat <input type="checkbox"/> Medium (11.5x10") <input type="checkbox"/> Large(14x13") Trunk Support Upgrades: <input type="checkbox"/> ProSeries Full Padded Back <input type="checkbox"/> ProSeries Head Rest <input type="checkbox"/> ProSeries Lumbar Pad
<input type="checkbox"/> Option #3 – Upgraded Seating System: Gray Bucket Seat
AM-16 Accessories: <input type="checkbox"/> H-Harness - 11.5" <input type="checkbox"/> 9" Extender Tube <input type="checkbox"/> XL Exercise pedals (hand+foot only) <input type="checkbox"/> Knee Separator: <input type="checkbox"/> 2" <input type="checkbox"/> 5" <input type="checkbox"/> Vertical Hand Grips <input type="checkbox"/> 9/16" Exercise pedals (hand+foot only)

<input type="checkbox"/> <b>1020 "Junior" HAND TRYKE</b> (20" wheels & 3-Speed drive train) <b>50-HC-1020</b> Arm length 19-30"
<input type="checkbox"/> Option #1 – Standard Seating: Small Wheelchair Seat (3.5" narrower in width and depth than the Large) Seat Alternates: <input type="checkbox"/> Large Wheelchair Seat
1020 Accessories: <input type="checkbox"/> Wheelchair Seat Bar Ends <input type="checkbox"/> Swing-Away Arms

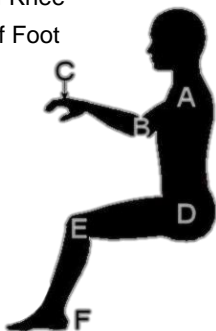
<input type="checkbox"/> <b>1024 HAND TRYKE</b> – (24" wheels & 3-Speed drive train) <b>50-HC-1024</b> Arm length 22-26"
<input type="checkbox"/> Option #1 – Standard Seating: Large Wheelchair Seat (3.5" broader in width and depth than the Small) Seat Alternates: <input type="checkbox"/> Small Wheelchair Seat
1024 Accessories: <input type="checkbox"/> Wheelchair Seat Bar Ends <input type="checkbox"/> Swing-Away Arms

Therapist Assembly Notes or Comments (if any):

# AmTryke Sizing Chart

TRYKE TYPE (How will the tryke be propelled?)	RIDER LEG LENGTH (Inches from center of hip to bottom of shoe.)	RIDER ARM LENGTH (Inches from middle of shoulder to center of digit crease.)	MODEL	RIDER WEIGHT (Pounds)	RIDER MAX HEIGHT (Inches)	TRYKE WEIGHT (Pounds)	WHEEL SIZE (Inches)	TTRYKE HEIGHT (inches)	TRYKE LEGNTH (inches)	TRYKE WIDTH (Inches)
<b>Hand &amp; Foot</b>	15-21	13-17	AM-10	55	40	45	10	24	38	21
	19-24	15-20	AM-12S	150	40	45	12	27	38	24
	21-29	14-23	AM-12	150	47	45	12	36	60	32
	24-36	18-27	AM-16	175	66	55	16	36	68	33
<b>Foot</b>	15-21	12-20	1410	55	40	45	10	24	38	21
	23-28	16-24	1412	125	42	72	12	13	43	27
	26-32	16-24	1416	175	60	74	16	49	58	30
	29-35	20-30	1420	250	68	74	20	50	64	30
	30-45	22-34	1420XL	275	76	89	20	43	72	29
	30-41	20-28	JT-2000/ JT2300USS	250	74	80	20	48	72	32
	36-45	17-29	TP-3000	300	75	47	20	33	63-70	33
<b>Hand</b>	up to 37	19-30	1020	250	67	74	20	41	69	30
	up to 41	22-26	1024	250	72	85	24	45	75	32
<b>All trykes in the Hand &amp; Foot section can be converted to Hand trykes.</b>										

- A Center of Shoulder
- B Center of Elbow
- C Center of Digit Crease
- D Center of Hip (greater trochanter)
- E Center of Knee
- F Bottom of Foot



RIDER'S MEASUREMENTS	
<b>Arm Measurements (inches) Total Length</b>	
Left	A to B + B to C = _____
Right	A to B + B to C = _____
Trunk	A to D = _____
<b>Leg Measurements (inches) Total Length</b>	
Left	D to E + E to F = _____
Right	D to E + E to F = _____

HELMET SIZING	
Sizes	Head Circumference Inches
Toddler (XS)	17.7" – 19.3"
Child (S)	20.5" – 21.7"
Youth (L)	20.9" – 22.4"
Adult (XL)	22.4" – 23.6"