

**Winter Park Public Library Bicycle Check-out Program
Risk Acknowledgement/Liability Waiver - Borrower**



Borrower Name (please print): _____
Last First MI

ID Numbers: _____

Two forms of ID are required: A WPPL library card or proof of current registration @ The Alford Inn and a valid Driver's License or state ID

Phone Number: _____ **Maximum of 2 bikes per borrower**

ALL BICYCLES MUST BE RETURNED NO LATER THAN 4:00 P.M. FRIDAY-SUNDAY AND 8:00 P.M. MONDAY-THURSDAY ON THE DAY OF CHECKOUT.

PLEASE READ THIS AGREEMENT CAREFULLY. IT IS A LEGAL CONTRACT AND AFFECTS ANY RIGHTS YOU MAY HAVE IF YOU ARE INJURED OR OTHERWISE SUFFER DAMAGES WHILE PARTICIPATING IN THIS ACTIVITY.

1. As the Rider and/or Borrower, I understand that riding a bicycle is risky. I assume all risks associated with use of the equipment. I specifically release the Winter Park Public Library, its officers, employees and agents, from any and all damage or injuries sustained as a result of use of the equipment, including but not limited to any negligence on the part of the Rider and/or Borrower, as well as any negligence on the part of the Winter Park Public Library, its officers, employees or agents.
2. As the Rider and/or Borrower, I agree to hold Winter Park Public Library harmless against any and all claims, suits, costs and injuries arising out of use of the equipment by the Rider and/or the Borrower.
3. As the Rider and/or Borrower, I shall be responsible for any damages, negligent or wrongful use, or replacement costs associated with the equipment and any late fees incurred, which will be charged at \$1 per hour.
4. As the Rider and/or Borrower, I am at least 18 years of age and capable of operating the equipment.
5. As the Rider and/or Borrower, I will inspect and report any damage and/or non-working parts to a Winter Park Public Library Circulation staff person, immediately.

I HAVE READ AND UNDERSTAND THE ABOVE REGULATIONS:

Signature of Borrower: _____ I decline to checkout a helmet _____

Bike pick-up date: _____ Time: _____ Bike return date: _____ Time: _____

Bike I.D. Number(s): _____ Helmet #(s): _____ Library Staff: _____

**Winter Park Public Library Bicycle Check-out Program
Risk Acknowledgement/Liability Waiver – Rider**



Rider Name (please print): _____
Last First MI

ID Number: _____ *One form of ID is required: a valid Driver's License or state ID*

Phone Number: _____ **Maximum of 2 bikes per borrower**

ALL BICYCLES MUST BE RETURNED NO LATER THAN 4:00 P.M. FRIDAY-SUNDAY AND 8:00 P.M. MONDAY-THURSDAY ON THE DAY OF CHECKOUT.

PLEASE READ THIS AGREEMENT CAREFULLY. IT IS A LEGAL CONTRACT AND AFFECTS ANY RIGHTS YOU MAY HAVE IF YOU ARE INJURED OR OTHERWISE SUFFER DAMAGES WHILE PARTICIPATING IN THIS ACTIVITY.

1. As the Rider, I understand that riding a bicycle is risky. I assume all risks associated with use of the equipment. I specifically release the Winter Park Public Library, its officers, employees and agents, from any and all damage or injuries sustained as a result of use of the equipment, including but not limited to any negligence on the part of the Rider and/or Borrower, as well as any negligence on the part of the Winter Park Public Library, its officers, employees or agents.
2. As the Rider, I agree to hold Winter Park Public Library harmless against any and all claims, suits, costs and injuries arising out of use of the equipment by the Rider and/or the Borrower.
3. As the Rider, I am at least 18 years of age and capable of operating the equipment.
4. As the Rider, I will inspect and report any damage and/or non-working parts to a Winter Park Public Library Circulation staff person, immediately.

I HAVE READ AND UNDERSTAND THE ABOVE REGULATIONS:

Signature of Rider: _____ I decline to checkout a helmet _____

Bike pick-up date: _____ Time: _____ Bike return date: _____ Time: _____

Bike I.D. Number(s): _____ Helmet #(s): _____ Library Staff: _____