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

Borrower Name (please print): ____________________________________________

ID Numbers: __________________________________________

Last First MI

Two forms of ID are required: A WPPL library card or proof of current registration @ The Alfond 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): ______________________

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: ______________________