

Billy's Bike Shop

1470 Periwinkle Way, Sanibel Island, FL 33957

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www.sanibelbike.com

Road Bicycle Rental Assumption of Liability Form

By signing this assumption of liability, I acknowledge that the bicycle I am renting is of the correct size for me, and I will not attempt to raise the saddle any higher than allowed by the "max height/min insertion" line marked on the seat post, and by doing so I will damage the frame, and I will be held responsible for the replacement cost of the bicycle frame. _____ (initials)

By signing this assumption of liability, I understand that I cannot, and will not, attempt to attach any type of device/mounting that requires loosening of any bolts on the bicycle. _____ (initials)

By signing this assumption of liability, I understand that I cannot, and will not, attempt to attach any type of trailer, child seat, or any other type of device to the bicycle. _____ (initials)

By signing this assumption of liability, I understand that I am personally responsible for my own actions, safety and physical well-being, and am releasing Billy's Bikes from any and all liability whatsoever. _____ (initials)

By signing this assumption of liability, I understand that the use of this bicycle is "At My Own Risk", and I release Billy's Bikes from any and all responsibility and liability whatsoever. _____ (initials)

By signing this assumption of liability, I understand that I must return the bicycle to Billy's Bikes, and that if the bicycle I am renting is not returned to Billy's Bikes, that Billy's Bikes will charge my credit card in the amount of up to \$2,500.00, utilizing the credit card held on file that I have pre-authorized for Billy's Bikes use. _____ (initials)

By signing this assumption of liability, I understand that I will be held financially responsible for any and all physical damage to this bicycle, and for any damage and damages that I may cause, and release Billy's Bikes from any and all liability whatsoever. _____ (initials)

Signature: _____ Date: _____

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____

Local Accommodations: _____

Emergency Contact

Name: _____ Relationship: _____

Phone: _____