

Minnesota West Community & Technical College
Bike use Agreement

Please read, complete, and sign both the Bike use Agreement and Liability Waiver (page two).

Name:

Address:

Phone:

Email:

TechID or starID

Emergency contact name:

Emergency contact phone:

I have read the below terms carefully. I am entering this agreement of my own free will. I am at least 18 years old and have the right to contract in my own name. I understand that the below terms apply to all my future use of Minnesota West Community & Technical College bikes (hereafter 'Bicycle'), and I agree to all terms. I acknowledge Minnesota West has never explicitly or implicitly assumed any responsibility for me or my actions in connection with my use of the Bicycle. I accept the Minnesota West Bicycle Use Agreement and agree to keep the Bicycle safe and in good condition. *I understand if I fail to return the Bicycle by the specified date, or if the Bicycle is damaged during the use period, a hold may be placed on my registration and I may be held liable for the full replacement value of the bike (up to \$250), lock (\$35), or key (\$10).*

Signature:

Date:

To be completed by the Resource Specialist or other appointed office personnel.

Date bike returned:

Assigned Bike Number:

Minnesota West Community and Technical College Acknowledgement of Risk and Liability Waiver

I am aware that exercise and recreational activities can be physically stressful and in certain instances can be harmful and result in injury or death. I understand that I should consult with my personal physician before I begin or continue any exercise activity. In consideration of my participation in Minnesota West Community & Technical College Bike use, I agree as follows:

1. I understand the risk and danger to me and my property associated with my participation in the Bicycle use, I do so voluntarily in reliance upon my own judgment and ability. I assume all risk of personal injury, death, and property damage or loss from any cause whatsoever, including, but not limited to: failure to enforce rules, failure to inspect equipment or facilities, and negligence of other students or staff.
2. I shall indemnify, defend and hold harmless Minnesota West Community & Technical College, or any officers, servants, agents, or employees from all liability, loss, costs, damages, claims, or causes of actions of any kind or nature whatsoever, and expenses, including attorney fees arising or claimed to have arisen out of personal injuries or death, or property damage or loss, sustained by me as a result of negligence on the part of Minnesota West, its staff or other participants, or by others as a result of my own negligence or intentional acts, during my participation of the Bicycle Use.
3. I acknowledge receipt of instructions about potential risks, including risks of property damage or loss, personal injury, and death, associated with my participation. **I understand that I am responsible for my safety during this activity**, and I assume that responsibility. I certify that I am at least eighteen (18) years of age, medically sound, and physically fit to participate in the use of the college Bicycle. I certify that I have read the foregoing information and understand it and that any questions, which may have occurred to me, have been answered to my satisfaction.

I HAVE READ AND UNDERSTAND THIS DOCUMENT AND AGREE TO ITS TERMS.

Name:

Signature:

Date:

Participants under the age of 18 must have this Acknowledgement co-signed by their parent or guardian.

Name:

Signature of Parent/Guardian:

Date: