I, _________________________________________________, being over 18 years of age, desire to participate in the University of Kentucky winter break bicycle storage program. I am aware that Wildcat Wheels Bicycle Library (WWBL) staff, volunteers, and associated UK personnel are not responsible for any damages that may occur to my bicycle during the time period that I leave it in their care. By signing this form I recognize and assume all risks associated with allowing the WWBL staff and volunteers and any associated UK personnel to store my bicycle over the winter break, and agree to hold all representatives of the program harmless from any and all obligations, liabilities, claims, demands, costs, and expenses, including attorney’s fees, or demands of any kind and nature whatsoever which may arise by or in connection with the winter bike storage program.

I understand that my bicycle must have an official UK bicycle permit sticker in order to be stored at WWBL.

FINANCIAL LIABILITY

I understand that I am responsible for the on-time pick up of this bicycle, which can be picked up at any time during regular Wildcat Wheels shop hours, but which should be picked up within the first two weeks of the spring semester. I recognize that if I fail to pick up this bicycle by the date stated above that I agree to pay a $2.50/day storage fee for every business day that the bicycle remains at Wildcat Wheels. Failure to pay any outstanding fees will result in loss of access to the programs and services offered by the Wildcat Wheels Bicycle Library (WWBL). Failure to pay fees in excess of $30 will result in a HOLD placed on your student records. The hold will prevent registrations, readmission, transfer of credits, graduation and obtaining official transcripts.

BICYCLE INFORMATION

UK Bicycle Permit #: ______________________________________________________________________

Bicycle make & model: ______________________________________________________________________

Bicycle color(s): ____________________________________________________________________________

Other identifying features: ___________________________________________________________________

In signing this Waiver, I acknowledge and represent that I have read it, understand it, and sign it voluntarily as my own free act and deed; no oral representations, statements or inducements, apart from this waiver have been made.

_____________________________________________________   ______________________________________
Signature   Date

_____________________________________________________
Name (typed or printed)   UK ID Number   Link Blue ID

_____________________________________________________
Phone Number   Email Address