OLD FORGE CROSSING

BICYCLE REGISTRATION FORM

DATE:_____

NAME _____ **UNIT #**_____

TELEPHONE: HOME (____)_____
AREA CODE

WORK (____)_____
AREA CODE

MAKE OF BICYCLE	COLOR	STICKER NUMBER (OFC will provide)

I am the Owner of the above bike(s) and agree to the following:

1. **I will affix each sticker indicated above to the rear fender frame of the bike to which it applies.**

2. **I will return each sticker as and if the bike to which it applies is disposed of and/or when my residency terminates.**

3. **I will report the acquisition of other bikes by making new permit applications for them.**

4. **I will not hold the Old Forge Crossing Condominium Association responsible for theft or damage to my bike(s) or to my possessions thereon.**

5. **It is understood that all bikes within the OFC complex, without permits or those that appear to be abandoned, will be disposed of.**

_____
(Resident Signature)