

OLD FORGE CROSSING CONDOMINIUM ASSOCIATION

BICYCLE REGISTRATION FORM

Date: _____

Name: _____

Unit No: _____

Phone: Mobile _____ **Home** _____

Email Address: _____

Make of Bicycle	Color	Sticker No. (OFC will provide)

I am the owner of the bicycles(s) and agree to the following:

1. I will affix each sticker indicated above to the left 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 Old Forge Crossing complex, without permits or those that appear to be abandoned will be disposed of.

Resident Signature