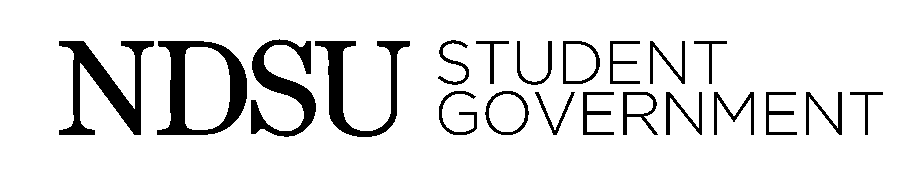
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**Member Equipment Agreement Template**

\*This is not a complete form, this is merely a template. The organization should tailor it to their individual needs\*

*This Member Agreement Form should be signed by every organization member and kept on file by the organization leaders. A copy of this form must be turned into Student Government. Please send your organization’s copy to the Assistant Executive Commissioner of Finance (*[*ndsu.sg.finacne@ndsu.edu*](mailto:ndsu.sg.finacne@ndsu.edu)*).*

By signing this contract, you hereby are responsible for the organizational equipment in which you are allocated.

I understand I am required to pay a $100 fee to use this bike and can receive a refund of $80 If I return the bike on time without any damage beyond normal wear and tear. If I lose my privileges using this bike I understand I will give up my privilege to the refund. If there is damage to the bike the repair cost will come out of my original fee. I understand I will be responsible for the bikes original value if damaged beyond repair which is

listed as: $X, XXX

I am always required to store this bike at a safe location. Bike must be locked up if outside of a building while not attending a race where the bike is in a safe place.

This bike is not to be used as a mode of transportation, but rather a means of practicing for cycling. The clause states you can ride your bike to class only if your intended cycling practice is to be immediately following class or immediately before class.

While not in use this bike must be stored at the Great Northern Bicycle Co. On Broadway.

I\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby agree to all terms and conditions of this contract and will protect this property to the best of my abilities and understand the responsibilities of respecting the bike and the community. If I do not comply with this contract I understand my privileges to use this bike will be revoked.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

License Number Student ID number Phone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_\_\_\_

Home address City State Zip Code

Emergency contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Relationship Number