

MOBILITY SCOOTER RENTAL AGREEMENT AND WAIVER FORM
SEASIDE SCOOTERS
Weight limit: 400 lbs

Name: _____

Mobility Scooter #: _____

Address: _____

Rental Date and Time: _____

Phone Number: _____

Return Date and Time: _____

**SEASIDE SCOOTERS RULES AND CHECKLIST
SCOOTER CAN NOT BE OPERATED IN RAIN. CAN NOT GET WET.**

Getting on and off scooter ____

Operation of seat ____

Key insertion and removal ____

Forward and Reverse ____

Release throttle to stop ____

No standing while riding ____

Show courtesy and yeild to pedestrians ____

No U-turn on hills or ramps ____

No additional passengers ____

Do not operate while using mobile devices ____

No driving while intoxicated or otherwise impaired ____

**FAILURE TO COMPLY WITH THESE RULES WILL RESULT
IN TERMINATION OF EQUIPMENT USAGE WITHOUT A REFUND OF RENTAL FEE.**

Signature of Renter: _____

PLEASE NOTE:

SCOOTER RENTAL PERIOD BEGINS UPON EXITING THE FACILITY AND DUE BACK ON THE AGREED UPON TIME. LATE RETURNS WILL BE SUBJECT TO A LATE FEE.

THE MOBILITY IS A SINGLE PERSON CHAIR. PLEASE DRIVE CAREFULLY.

TERMS AND CONDITIONS:

By signing, I agree to indemnify and hold harmless Seaside Scooters from and against any and all liability, loss, damage, expenses (including legal expenses), cause of action, suits, claims or judgments arising from injury or death of persons or damaged property, of any nature whatsoever, resulting from the actual or alleged presence, use, or operation of the equipment, provided such injury, death or property damage is not attributable to the negligence of Seaside Scooters. Seaside Scooters owns the equipment and I agree to not give or transfer possession of the equipment to anyone else. I authorize Seaside Scooters to charge \$2,400 for the replacement cost of a mobility scooter. I understand the weight capacity of the equipment is 400lbs and I am within that limit. I have been instructed on the use of equipment and am capable of operating it safely. I understand the staff and Seaside Scooters are available should I have any questions during use of equipment. I authorize Seaside Scooters to charge my credit card in the amount agreed upon. This agreement contains the entire understanding of the parties. This agreement is governed by New Jersey law.

Signature of Renter: _____

Date: _____

ALL SALES FINAL. NO REFUNDS ON EARLY RETURNS DUE TO WEATHER OR OTHER CONDITIONS.



Seaside Scooters LLC
1114 Boulevard, Seaside Heights, NJ 08751
1-614-SCOOTER

CREDIT CARD AUTHORIZATION

By signing below, I, the renter agree to the provisions of the Seaside Scooters LLC Rental Agreement Terms and Conditions. I acknowledge that I have had an opportunity to read the entire agreement before signing and authorize Seaside Scooters LLC to process a separate credit/debit card transaction for all charges, including but not limited to late fees and lost or damaged rental equipment.

_____ I also understand that I am fully responsible for the rental, and if lost or stolen, allow my card to be processed for the full replacement value or deductible, up to (Bicycle) \$425, (Mobility Scooter) \$2,400, (Helmet) \$35, (Bell) \$7, (Locks) \$13, (Basket) \$22, (Flat Tires) \$21.

_____ I allow Seaside Scooters LLC to charge my card in my absence.

PRINT NAME

TIME AND DATE

ADDRESS

CCV # BILLING ZIP CODE

SIGN NAME

PHONE NUMBER

E-MAIL