Cross Florida Ride
SAG Driver Registration Form

Driver Information:

LAST: _____ FIRST: _____

STREET: _____

CITY: _____ ST: _____ ZIP: _____

PHONE: _____

Vehicle Information:

YEAR: _____ MAKE & MODEL: _____

STATE: _____ LICENSE PLATE NO: _____

SAG Vehicle Rules:

1. NO handing out bottles or food on the move.
2. NO driving slowly ahead, behind or aside of the rider(s). Instead please drive ahead and wait for your rider(s).
3. SAG drivers please make use of SAG sites and convenience stores to meet up with your rider(s).
4. Please consider alternate routes to help alleviate traffic.
5. Please make use of cell phones if needing assistance.

Recognizing that the Spacecoast Freewheelers and their officers and members are not insurers of the safety or protection of my vehicle or its drivers. I agree to abide by all oral or written requirements established for vehicles accompanying Cross Florida Bike Ride. I agree that the above organizations or any officers and members or any other individual organizing or assisting in this event shall not be liable for any harm, loss or damage I may incur while participating.

VEHICLE OWNER SIGNATURE: _____ I HAVE READ THIS RELEASE _____

VEHICLE DRIVER SIGNATURE: _____ I HAVE READ THIS RELEASE _____

DATE: _____