

CORPORATE AND CONTINUING EDUCATION AUTHORIZATION TO OPERATE MOTORCYCLE



All students using a borrowed motorcycle must have the owner's permission to operate. Please note for the purpose of our class, if your name is not on the registration, then it is a borrowed motorcycle. Please have the owner complete sign this form prior to beginning the motorcycle course. The student must have the registration and proof on insurance available during the class.

OWNER'S INFORMATION

Last Name First Name Middle

Street Address (include apt. #) City State Zip Code

Home Phone Number Work Phone Number

INCLUSIVE DATES OF OPERATION

_____/_____/_____
Date From

_____/_____/_____
Date Until

MOTORCYCLE INFORMATION

Motorcycle Year Motorcycle Make Motorcycle Model

VIN Number License Plate Number

Insurance Company Name Policy Number

Insurance Expiration Date and Time

INSURANCE AGENCY

Name Telephone Number

Insurance Agency Street Address (include suite #) City State Zip Code

* Owner is defined under the South Carolina Code of Laws, Section 56-3-20 as follows: "Owner" means a person who holds the legal title of a vehicle or, in the event (a) a vehicle is the subject of an agreement for the conditional sale or lease with the right of purchase upon performance of the conditions stated in the agreement and with an immediate right of possession vested in the conditional vendee or lessee or (b) a mortgagor of a vehicle is entitled to possession, then the conditional vendee or lessee or mortgagor is deemed the owner for the purpose of this chapter.

OPERATOR'S INFORMATION

Last Name First Name Middle

Street Address (include apt. #) City State Zip Code

Home Phone Number Work Phone Number

I _____ give _____
Owner Operator

my permission to Owner Operator operate the above identified vehicle during the dates indicated above (**) for the purpose of using the vehicle while taking a rider education course. I understand the course is being implemented by "the Sponsor" which include its members, employees, agents, representatives and those governmental agencies and other organizations affiliated with this course including but not limited to South Carolina Rider Education (SCRE), its members, employees, agents and representatives.

Owner's Signature Date

Sworn to before me this _____ day of _____, 20____.

NOTARY PUBLIC FOR SOUTH CAROLINA

Notary Signature

PLACE SEAL

Commission Expires