



THE UNIVERSITY of  
**MISSISSIPPI**

DEPARTMENT OF PARKING & TRANSPORTATION

Bike Donation Form:  
(PLEASE PRINT LEGIBLY)

Owners Name: \_\_\_\_\_

Date: \_\_\_\_\_

Owners Email: \_\_\_\_\_

Owners Address: \_\_\_\_\_

\_\_\_\_\_

Owners Contact Phone: \_\_\_\_\_

Bike Information:

Bike Registration (if available) # \_\_\_\_\_ and Serial # \_\_\_\_\_

Bike Description:

Make: \_\_\_\_\_ Age: \_\_\_\_\_

Condition: \_\_\_\_\_

\_\_\_\_\_

Any Need Repairs: \_\_\_\_\_

Release:

I \_\_\_\_\_, sole owner of the above describe bicycle wish to donate the bicycle to the University of Mississippi Rebel Pedals Rental Program with the understanding that the bicycle will be utilized as part of the rental fleet. In the event the bicycle is not in a usable condition and cannot be repaired, I understand the bicycle will be used for parts and/or disposed of in accordance with University Policy.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Bike Shop Representative