

LAKE IN THE CLOUDS
RECREATIONAL VEHICLE REGISTRATION FORM

Name: _____ Section & Lot #: _____

Address: _____

Telephone number: _____

Type of Recreational Vehicle(s) (check all that apply)

Snowmobile _____ ATV _____ Golf Cart _____ Moped _____

Other _____ (Please specify) _____

Make and Model Number(s): _____

Registration Information: _____

Insurance Information: _____

(If applicable, attach copies of valid registration and insurance cards for each vehicle checked)

Homeowner's Insurance Company is aware of units checked: Yes _____ No _____

All LITC rules and regulations must be followed and operators of the vehicle(s) will be held liable and accountable.

I will be a responsible rider knowing that many people will judge all snowmobile/ATV operators by my actions. I will use my influence with other operators to promote safe riding.

I understand that I operate the vehicle at my own risk and accept all legal responsibility for injury of any kind to any person, including myself, or damage of any kind to personal or Association property to the extent that the injury or damage results from the risks inherent in my operation of the vehicle. I agree not to pursue legal action or seek damages from the LITCPOA or any property owner pursuant to any accident involving my operation of a vehicle on frozen lake surfaces in the community. In the event that any accident occurs between two or more property owners who are operating vehicles, resolution will be pursued by the involved parties and their private insurance arrangements.

Lot Owner's Signature: _____ Date: _____

Vehicle Operator's Signature: _____ Date: _____

For office use

Date Received: _____ LITC property owner's sticker registration number: _____