

B.I.K.E.R.S.C.A.P.

<http://www.BIKERSCAP.org>

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APPLICATION

Date: _____

I/we _____, as Parent(s) or Legal Guardian(s) of (child's name) _____, do hereby submit an application to **B.I.K.E.R.S.C.A.P. Inc.** and <http://www.bikerscap.org>© (AKA, BIKERSCAP) a Not For Profit, 501 (c) (3) Organization, for the donation of 1 (one) computer system for aforementioned minor child, to be used as a home educational tool.

Please tell us a little about your child:

Name: _____

Age: _____

School and Grade: _____

Years attended, and G.P.A. (If available): _____

May we contact your child's Teachers or Counselors? Yes No

Please tell us how you will facilitate this computer system to assist with your child's education: _____

Some Questions:

1. Will you be able to obtain Internet access for this computer? Yes No
2. Will this child be able to use this computer for educational purposes? Yes No
3. Will you need assistance with set up of system? Yes No

Terms and Stipulations of Application:

- 1.) Donated computer will not be sold, but can be upgraded once yearly, with proof of grades and computer usage, however, you must resubmit application to BIKERSCAP. Upgrades are subject to availability of systems and/or components.
- 2.) Parents and/or Legal Guardians agree to maintain computer with updates, and scanning all anti-virus applications, addressing all maintenance issues, agreeing also to provide ink

cartridges as needed for printing device, parents are warned formally all BIKERSCAP computer systems are serial numbered, and may carry web access restrictions.

- 3.) BIKERSCAP agrees to (if necessary), provide an in home 1 (one) hour tutorial class for Parents, and/or Guardians, pertaining to above mentioned maintenance issues.
- 4.) BIKERSCAP does not warrant donated computer system, nor is any type warranty implied, however, if within the first 30 days from donation, if hardware/software issue develops, recipient agrees to take said donation to BIKERSCAP IT Dept. for analysis, currently located in Holiday, FL. BIKERSCAP is not responsible for lost or corrupted data on unit or any storage device (i.e. USB drives, external hard drives, etc.). **Data backup is sole responsibility of recipient.**
- 5.) BIKERSCAP will not use, or sell your information to any third parties; however, your information may be released as required by law and/or Corporate by laws.
- 6.) BIKERSCAP considers all photographs, digital or other, including video, taken by BIKERSCAP Staff, Volunteers, and Corporate Officers, during donation, property of BIKERSCAP and may be used as deemed necessary by Board Members for promotional, advertising, Internet, and any other usage, in accordance with all applicable laws.
- 7.) BIKERSCAP agrees to use only information provided (i.e. child) by Parents, and/or Guardians, for any promotional usage.

Personal Information

Parents/Parent, or Legal Guardian(s) are required to provide personal information regarding making application to BIKERSCAP, BIKERSCAP Inc

1. Full name: Last, Middle, First

2. Present Home Address:

3. Phone Number(s): _____

Home Work Mobile Fax:

4. Current Employer: _____

5. May we contact employer? Yes No

6. School name and County of applicant child _____

7. May BIKERSCAP Inc. request an assessment with Administration of child's school needs regarding special software applications? Yes No

8. Have you been arrested of a felony in the last 3 years, if so, attach information on separate attached paper, (Being arrested does not exclude you). Yes No

9. I agree to provide BIKERSCAP copies of State ID and one (1) recognized ID.

10. Applicants understand that BIKERSCAP will investigate all applications: (Yes) (No)
Acknowledged by my signature below, under penalty of perjury, and enforced by applicable laws, I swear above statements are true and concise as of date of application acceptance and will provide by agreements set forth in stipulations to application, para.2.

I/we, (_____), agree to the
aforementioned terms, and hereby submit my application to BIKERSCAP for 1 (one) computer
system, to be used as an educational tool for: (child's name) -

Applicant Signature: X: _____

Applicant's Relationship to Child: Parent () Legal Guardian ()

BIKERSCAP Authorized Agent: X: _____

Witness, Print name, and sign _____

For B.I.K.E.R.S.C.A.P. Staff Use Only

Application received on this date:

Application received by:

Application Approved () Denied ()

Processed by: _____

Date: _____

Revision per GR, 3-7-09. 9-6-09,
Update Rv. 6-08-2018 by RB, per GR