

**GOLF CART OWNER REGISTRATION
TOWN OF CEDAR POINT, NORTH CAROLINA**

(Please Print in Blue or Black Ink)

Golf Cart Owner's name(s): _____

Owner's Physical Address: _____

City/Town: _____ State: _____ Zip: _____

Owner's Mailing Address: _____

City/Town: _____ State: _____ Zip: _____

Owner's Telephone No. Daytime: (____) _____ Night time: (____) _____

Owner's Driver's License Number: _____ State: _____

Make of Golf Cart (Mfg): _____

Color of Golf Cart: _____ Model (Year): _____

Serial Number of Golf Cart: _____

Liability Insurance (Company, Policy Number, Insured): _____

List All Eligible Drivers in Household, and Drivers License Numbers: _____

Please Attach Copies of Liability Insurance AND Driver's License

I have received, read and understood the "Golf Cart Ordinance." I have paid the registration fee for the above cart and agree to additional assessments as may be required in support of this ordinance. I acknowledge that I will assume all liability, and am fully responsible for the operation of the above cart on the streets and roads in the Town of Cedar Point. I also acknowledge that the Town of Cedar Point, in providing this privilege, is in no way endorsing the operation of this cart on the streets and roads, and does not and will not assume any liability in the operation of the cart. I agree to indemnify and hold harmless the Town of Cedar Point for any and all liability arising from the use of this golf car/cart. **I also understand that the Town of Cedar Point's interpretation of all the rules and regulations are final.** I will insure that the permit sticker will remain attached to the driver's side of the cart at all times. I furthermore insure that I will obey all the rules and regulations set forth by the Town of Cedar Point concerning the operation of a cart within town limits.

Owner's Signature

Date

For Town's Use Only

Approved By Town of Cedar Point Safety Officer: _____

Permit Number: _____

Signature

Date