

**Staffordshire County Council**  
**Bike Sense Rider Development Course**  
**Disclaimer**

**Student:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Make of Vehicle: \_\_\_\_\_

Registered Number: \_\_\_\_\_

Driver Number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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

Bike Sense Development Date: \_\_\_\_\_

Trainer: \_\_\_\_\_

**Disclaimer:**

I am undertaking this Motorcycle Training Advice with the knowledge that I am in FULL control of my machine at all times. I declare that I have full documentation for my machine and I will not hold anyone from Staffordshire County Council or any of their representatives, responsible for anything untoward that might happen during this session, for any loss or damage to my property, or any injury I may incur.

I agree that I will observe the legal speed limits

I agree that I will comply with the rules of the road

I declare that I am in a good state of health, and am not on any medication that may detrimental to my performance

Signed: \_\_\_\_\_

Trainer: \_\_\_\_\_

**Make a Choice for a Safer Staffordshire**



**Staffordshire**  
County Council