



Durango Adventure Rentals, LLC
ATV, UTV, Motorcycle Rental Agreement

Rental date ___/___/___ Return date ___/___/___ Half day___ Full day___ 24 Hour___

Departure Time_____ AM/PM Return Time_____ AM/PM

Renter's Name_____ Date of Birth ___/___/___

Renter's Phone Number(_____)_____

Renter's Email Address_____

Renter's Address_____

City_____ State_____ Zip Code_____ Country_____

Drivers License Number_____ State Issued_____ Age_____ Name_____

Drivers License Number_____ State Issued_____ Age_____ Name_____

Drivers License Number_____ State Issued_____ Age_____ Name_____

Drivers License Number_____ State Issued_____ Age_____ Name_____

Durango Adventure Rentals agrees to rent the following ATV/ATVs, Motorcycle/Motorcycles and UTV/UTVs to the above listed renter, upon the condition that Renter agrees to all terms and conditions set forth below (including the release of claims) and evidences that agreement with his/her signature below.

1st ATV, UTV or Motorcycle VIN_____ Model_____ Color_____

List any and all existing damage to the above listed equipment, ANY DAMAGE NOT LISTED BELOW WILL BE THE RESPONSIBILITY OF THE RENTER LISTED AT THE TOP OF THIS FORM.

2st ATV, UTV or Motorcycle VIN_____ Model_____ Color_____

List any and all existing damage to the above listed equipment, ANY DAMAGE NOT LISTED BELOW WILL BE THE RESPONSIBILITY OF THE RENTER LISTED AT THE TOP OF THIS FORM.