



Segway Inc.
US Segway Experience Center Application

Applicant Overview

Thank you for your interest in becoming a Segway Experience Center. Please provide us with the following information and someone will contact you.

General Information

Applicant Name: _____

Home Address: _____

City/State: _____

Telephone: _____

Mobile Phone: _____

Email Address: _____

Current Business or Occupation: _____

Do you currently own at least one Segway PT? Yes No

Do you currently operate a Segway PT tour or rental business? Yes No

What made you think about becoming a Segway Experience Center?

Have you ever ridden a Segway PT? Where did you have your first Segway PT ride?

Tell us, in general terms, about the advantages of your chosen location(s) and the markets you will target.

Where is the nearest existing Segway PT Dealership and how far away are you planning to be located? Visit www.segway.com for a current list of Dealership locations.

Do you know of other Segway-related activities in the area? Other Segway PT tours or rentals? A large existing Segway customer? An active Segway PT owners group?

Proposed Segway Experience Center Location

Where do you plan on establishing the Segway Experience Center?

What is the address of the proposed Segway Experience Center?

Street: _____

City/State/Zip: _____

Are you planning more than one location at this time?

Yes

No

Is there another non-Segway related business at this same location? Yes No

If yes, what are the other products or services offered at this location?

Is this location (check one): Owned by you Rented Leased

If photos of your location are available, please include them with this application.

Your Business Experience

Tell us briefly about your prior business experience or attach a resume.

Investors, Management & Staff

List all other persons who will have a financial interest or management in the Segway Experience Center (Name/Title/Percent Active/Investment Amount/Percent Ownership)

Do any of the above investors have a financial interest in any other Segway Dealership or Segway tour or rental business?

Have you identified dedicated Segway staff for the SEC? Yes No

References

Please provide three professional references including relationship and telephone numbers.

Reference Name	Reference Relationship	Reference Telephone

Acknowledgements and Certifications

By signing and submitting this application, Applicant acknowledges and agrees to the following:

This application is submitted for review by Segway Inc., its officers, employees and agents.

Segway Inc. may in reviewing this application investigate and evaluate the credit worthiness, general reputation, character, background and business experience of the Applicant and the Applicant expressly requests and authorizes any individual, partnership, or corporation to provide Segway Inc., its employees and agents (including independent investigative agents) with any and all information which may be requested of them in connection with the review of this application.

This application does not bind Applicant to accept, nor does it obligate Segway Inc. in any way to offer, a Segway Inc. Experience Center Agreement. Any options on real estate or investments made or expenses of any kind incurred by Applicant in anticipation of or in preparation for this application are done solely at the Applicant's risk and their own responsibility, and do not obligate Segway Inc. or any of its representatives in any way.

The execution of a Segway Experience Center Agreement between Segway Inc. and Applicant is the only manner by which this application may be accepted. Applicant admits that no representations or statements have been made to Applicant by Segway Inc., or on Segway Inc.'s behalf that would in any way tend to change or modify any terms of this application or of the Segway Experience Center Agreements, or that the Applicant is relying on as an inducement to execute this application or the Segway Experience Center Agreement.

Segway Inc. and its representatives have made no representations, assurance, or guarantees as to the profitability or success of the proposed Segway Experience Center venture, and that the ultimate profitability or success of the proposed Segway Experience Center depends on future market conditions and economic factors that are beyond the Applicant's and Segway Inc.'s control. As a result, the Applicant's investment in the proposed Segway Experience Center is made solely at the Applicants' risk.

Any material misrepresentation or omission, intentional, or unintentional, in the information supplied by the Applicant in connection with this application shall constitute grounds for immediate termination of any Segway Experience Center Agreement subsequently entered in to by the Applicant and Segway Inc.

This Application is submitted to Segway Inc. at Bedford, NH, USA, and is governed by the laws of the State of New Hampshire, USA.

Segway Inc. may request updated financial information from the Applicant from time to time and Applicant agrees to provide such updated information with 7 days.

The undersigned certifies that he/she has read the foregoing application and that the information supplied herein is true and correct to the best of his/her information and belief.

Date completed by Applicant: _____ , 20 ____.

Applicant Name: _____

Applicant Signature: _____