## **AARROW BAIL BONDS, LLC**

DATE:	BOND #:
AMOUNT OF BOND:	PREMIUM:
I understand in signing this bond for obtaining	the release of
Law recognible for him/her appearing in Cou	
-	rt each time he/she is so ordered; also, I understand I am responsible for
payment of any court costs for non-appearance	e if he/she any and all instructions or orders of the Court or forfeits this
bond, and it becomes necessary to apprehend	and surrender him/her to the Court, I understand I am responsible for
any and all expenses incurred as a result of suc	h forfeiture and further, if such a forfeiture occurs and defendant is not
surrendered to the Court within time prescribe	d by law, I understand I am required to pay the FULL AMOUNT of the
bond posted, including unpaid bail premium.	Should state laws supersede this or any part of the agreement, all other
terms are still in full force and effect in accorda	nce with all the terms of the Bail Agreement herewith.
COLLATERAL cannot be returned until such tim court.	e as Aarrow Bail Bonds, LLC receives written notice from the clerk of the
I am not a paid signer. I have no connection wi	th a Bail Bond Consultant.
I have read the above contract and understand	it, and agree to fulfill ALL the provisions therein.
Print Name	Signature
Print Name	Signature
 Print Agent Name	 Print Agent Signature