
Community Relations

Use of School Equipment Check-Out Form

NAME OF PERSON OR ORGANIZATION: _____

EQUIPMENT REQUESTED: _____

PURPOSE OR USE OF EQUIPMENT: _____

DATE OF USE: _____

DATE TO BE RETURNED: _____

We understand that we are responsible for returning the above equipment in the same condition we received it, and are financially responsible for any damages(s) or loss of equipment.

Signature: _____ Date: _____

Building Principal Signature: _____ Date: _____

Approved: 1988

Revisited: April 24, 1995