

SOUND EQUIPMENT BORROWED FORM

St. Andrew's United Methodist Church

PLEASE READ AND SIGN: I agree to take full responsibility for the below-stated items while they are away from the church property. In the event they are lost or damaged, I will reimburse the church a sufficient amount to replace the item(s).

Signature of Borrower \_\_\_\_\_

Printed Name of Borrower \_\_\_\_\_

Item(s) Borrowed:

Description \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Borrower's Phone Number \_\_\_\_\_

Date & Time to be picked up \_\_\_\_\_

Location of pick up \_\_\_\_\_

Date & Time to be returned \_\_\_\_\_

Approved by Gayle Smith? \_\_\_\_\_

Signature of Board of Trustees Member \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

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I certify that the above items were returned in good condition.

Signature of Board of Trustees Member \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_