# Department of Art, Music, & Theatre

# visual & Performing arts building (VPA) 62, 217-206-6240

## Equipment Borrower’s Agreement

By my signature below, I acknowledge that I have read and agreed to all of the following statements for checking out equipment and/or accessories from the Department of Art, Music, & Theatre at University of Illinois Springfield.

* I agree that I assume full responsibility for all equipment and/or accessories and liability for all costs associated with damage to the equipment and/or accessories during the period it is checked out to me, or its ***replacement costs should it be lost or stolen.***
* I agree to sign this initial Equipment Borrower’s Agreement and present a valid I-Card for the checking out process.
* I am responsible for making sure that the equipment is in working order and without physical damage when it is checked out.
* I am aware that **it is my responsibility to return the equipment on or prior to the due date, or a hold will be put on my student account.** If equipment is going to be late, I will contact the supervising visual arts faculty and make arrangements for return.
* I understand my privilege to check out equipment may be removed for one semester if I fail to return loaned equipment by the due date.
* I understand that the supervising visual arts faculty will inspect the equipment and/or accessories for any damages upon return and that ***I will be liable for any repair or replacement costs.***

By signing in the space below, I hereby state that I have read and understand the above policies and agree to the terms and conditions of this Agreement.

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Name (Please Print) Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature UIN#

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Visual Arts Faculty Signature

Camera # Checked Out: \_\_\_\_\_\_\_\_\_\_\_\_\_

Camera Body\_\_\_\_ Lens\_\_\_\_ Charger\_\_\_\_ USB Cord\_\_\_\_ Lens Cap\_\_\_\_ Memory Card\_\_\_\_

Other Items Checked Out: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check Out Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Due Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check In Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Faculty Initials: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_