

## Wichita State University Instrument Rental & Check-Out Contract

Wichita State University and the Wichita State University School of Music hereby make a loan and grant temporary custody of the musical instrument listed below to \_\_\_\_\_ hereinafter "the Student."

Full Name

1. For an instrument needed for: Ensembles, Applied Lessons, or Athletic Bands, please have a School of Music Faculty member email a request to Dr. Shade and Mr. Hulett the instrument to which they will need you to have access. You must complete this step before the School will check out an instrument to you.
2. If the instrument needs repair, the Student must notify the Director of Bands immediately.
3. The Student shall replace or repair the instrument if it becomes lost or damaged. The Student will be held financially responsible in the amount of \$\_\_\_\_\_ if the instrument is not returned or is returned in a damaged and irreparable condition. The charges will be placed on the Student's WSU Account.
4. The Student shall not take the instrument from the Wichita area without the express consent of the head of the School of Music or his/her designee.
5. The instrument listed below shall be returned to the School of Music on the following date:

**Failure to return the instrument** by the deadline will place the student on Academic Hold, and the School of Music will place a Financial Hold with the University, file a report with the University Police, and take appropriate legal action, as necessary.

Instrument shared with: \_\_\_\_\_

Instrument \_\_\_\_\_ Brand Name \_\_\_\_\_ WSU No. \_\_\_\_\_

Serial No. \_\_\_\_\_ Equipment/Accessories \_\_\_\_\_

Case Number \_\_\_\_\_

Instrument used in which class, ensemble: MUS \_\_\_\_\_ Ensemble \_\_\_\_\_

In signing this contract, the student agrees to all of the conditions of the WSU Instrument Load Policy and Procedures and acknowledges receipt of above instrument with any equipment and accessories listed.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Student Information

MyWSUID: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Local Address: \_\_\_\_\_ Home Address: \_\_\_\_\_

Local Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

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### Office Use Only

Person Issuing Instrument: \_\_\_\_\_ Date Instrument Issued: \_\_\_\_\_

Person Checking Instrument In: \_\_\_\_\_ Date Instrument Returned: \_\_\_\_\_

Copy of Driver's License/State ID Card attached: \_\_\_\_\_ Copy of WSU ID Card attached: \_\_\_\_\_