

Instrumental Checkout

Name _____

Which class will this instrument be used for? (Circle all that apply)

Marching Band Concert Band Jazz Band Other

If you circled other, specify _____

Type of Instrument _____

Brand _____

Instrument Serial # _____

Condition at the time of check out? (Circle best option that fits instrument)

Excellent Very Good Good Poor Unplayable

Accessories (neck strap, mouthpiece, mutes, etc.) _____

Comments _____

By signing this document, I acknowledge that my student will assume full responsibility for this instrument throughout the 2018-2019 school year. I also understand that the annual rental fee for this instrument is \$25. If the instrument listed above is damaged, lost, or stolen, my student and/or I will be held responsible for any repairs or replacement if necessary.

Student Signature _____ Date _____

Parent Signature _____ Date _____

Home/Cell Phone # _____