

Date Out: _____

Date Returned: _____

Fall
20__

Spring
20__

Summer
20__

Received in by: _____

Middle Tennessee State University School of Music STRING Instrument Check-Out



(Please Print)

Name: _____
Last First Middle Initial

Student Faculty

M #: _____

E-mail address: _____

Billing Address: (Home/Permanent Address)

Street _____ Apt. _____

City _____ State: _____ Zip _____

Local Phone: _____ Home Phone: _____

Instrument: _____ Maker: _____

Instrument Number: _____

CIRCLE ALL THAT APPLY:

Instrument

Shoulder Rest

Rosin

Bow

Case

(Bow maker) _____

AGREEMENT

I agree to assume full responsibility for the above instrument during the checkout period, to include all damage, theft, loss or other incidence which may cause said instrument to be returned in less than satisfactory condition.

I agree to pay all costs of repairs for damage incurred during said checkout period and to pay replacement cost if the instrument is lost or stolen.

Storage of the instrument shall be my personal responsibility. Lockers may be obtained throughout through the music office, Wright Music Building room 150. Special series locks may be obtained at Phillips Bookstore. Instruments left unattended and unlocked will be confiscated and checkout privileges will be revoked for the remainder of the semester. Unless arrangements are made, instruments are to be cleaned and returned during office hours by the third day of finals: if not, a hold will be placed in the records office.

Date: _____

Signature _____

Approved by _____

Director or Studio Instructor and Director of School of Music

Note: Studio Instructor and Director of School of Music required for summer check out

Clerk Sign-out _____