

NORTHERN ARIZONA UNIVERSITY, COLLEGE OF ARTS AND LETTERS INSTRUMENT CHECKOUT CONTRACT

Semester (circle all that apply): **Fall** **Spring** **Summer** Year: _____ (circle one): **Full Time** **Part Time**

Course of Study (circle one): **Music Major** **Music Minor** **Other**

Student's Name: _____
(Please Print) Last First MI

Student ID #: _____ Local Phone Number: (_____) _____

Permanent Address: _____
Street City State Zip

Local Address: _____
Street City State Zip

INSTRUMENT INFORMATION

Instrument: _____ Make: _____

Model: _____ Serial Number: _____

NAU Number (if present): _____ Ensemble or Class: _____

Accessories:

___ Case ___ Ligature ___ Cap ___ Strap ___ Bocal ___ Mute ___ Bow

___ Mouthpiece (include make & model): _____

___ Other (please describe): _____

Visible Defects (be specific): _____

By signing this document I verify that I have checked the condition of this and it is in the condition as described above. I agree to keep it in good playing condition while it is checked out. The instrument is checked out for one semester only and must be returned or re-checked out before the last day of classes in the current semester. Any instrument not returned at the specified time will be considered stolen property of the State of Arizona and felony charges may be brought against me. I have received a copy of the current "Instrument Checkout Procedure" located in the Instrumental Studies handbook, and I agree to its terms.

I AGREE TO ASSUME FULL RESPONSIBILITY FOR ANY LOSS OR DAMAGE TO THE INSTRUMENT WHILE IT IS CHECKED OUT.

User Signature: _____ Date: _____ Amount Paid: \$ _____

Equipment Manager: _____ Date: _____ Check #: _____