

# PERCUSSION INSTRUMENT USAGE REQUEST

Name \_\_\_\_\_ Student ID# \_\_\_\_\_

Instrument(s) Requested/Location in Music Facilities: \_\_\_\_\_ (fair, good)

1. \_\_\_\_\_ from Rm # \_\_\_\_\_ Condition \_\_\_\_\_
2. \_\_\_\_\_ from Rm # \_\_\_\_\_ Condition \_\_\_\_\_
3. \_\_\_\_\_ from Rm # \_\_\_\_\_ Condition \_\_\_\_\_
4. \_\_\_\_\_ from Rm # \_\_\_\_\_ Condition \_\_\_\_\_
5. \_\_\_\_\_ from Rm # \_\_\_\_\_ Condition \_\_\_\_\_
6. \_\_\_\_\_ from Rm # \_\_\_\_\_ Condition \_\_\_\_\_

(Use addition form if more instruments are needed.)

Purpose of Use: \_\_\_\_\_

Location of Instrument(s) while in your possession: \_\_\_\_\_

Date Out: \_\_\_\_\_ Date to be Returned: \_\_\_\_\_

**I understand that while the instrument(s) listed above are in my possession I am responsible for their care. I am to return these instrument(s) in the same condition they are issued to me. If any damage or loss is incurred, I assume full responsibility for repair or replacement of the damaged items as determined by the Percussion Area.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**LEAVE  
COMPLETED,  
SIGNED FORM  
WITH MR. FORD**

\_\_\_\_\_  
Mark Ford

\_\_\_\_\_  
Date

**Make sure return of instruments is handled through Mr. Ford to avoid being charged for the instrument(s). NO MORE "I RETURNED THEM." The actual instrument return must be seen by Mr. Ford or someone he delegates.**

-----Office Use Only-----

Returned: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_ Intls. \_\_\_\_\_