

ASU Equipment Use Agreement

Name:	- Today's Date:
Club Name or Department	
Event Name	
Event Date:/ Time:	
Submit form to <u>asu@lavc.edu.</u> By signing this agree the equipment I check out. I understand I will be equipment. I will ensure the equipment is clean I understand that <u>a hold will be placed</u> on my guidelines above.	e responsible to PAY for any damaged when returned and properly stored.
Canopy qty (ASU Logo (10x10)	□ PA system
Chocolate Fountain	□ Megaphone qty
Coffee Urn (100 cups)	Wooden Posts(yellow) qty
┌── Feather Flags qty (ASU logo)	Other
☐ Hand Truck (dolly)	Other Office Supply (tape, scissors, etc.)
☐ Mascot Costume (Liam the Lion)	
Name of person responsible for item (s):	
Student ID/Employee#:	Phone#:
Email: S	Signature:
Club Advisor/Staff Signature	Date:/
******************	***************
Office	Use Only
Check-Out Date:// Check-Out Tir	me: Staff Name:
Return Date:// Return Time:	Staff Name:

NOTICE: To ensure resources are available, submit application **AT LEAST 10 WORKING DAYS PRIOR** to the event to **asu@lavc.edu**.