



SUMMER CAMPS

Sports · Academics · Visual and Performing Arts

MUSIC ACADEMY INSTRUMENT RENTAL AGREEMENT

Please return this form by the Wednesday before camp.

Fax: 850-479-6576

Mail: Music Academy

P.O. Box 18500

Pensacola, FL 32523-8500

Email: Reservations@YouthOutreachCamps.com

Camper _____ Date _____

I am requesting to rent a/an for use during *Music Academy*.

Instrument

After check-in, instruments may be picked up between 1:00 and 3:30 p.m.

No charge will be made for normal wear and tear on the instrument. I realize that normal care of the instrument is my responsibility. I also acknowledge that I assume all risks for theft and damages, mysterious or otherwise. I agree to pay any replacement or repair costs, if necessary, when the instrument is returned.

I will return the instrument and all accessories immediately after the final *Music Academy* Gala Concert.

Parent/Legal Guardian _____

Mailing Address _____

City _____ State/Country _____

Email _____

Home Phone _____ Cell Phone _____

Camper's Signature _____ Date _____

Parent/Legal Guardian's Signature _____ Date _____

(if camper is under 18 years)

Office Use Only

Instrument	Brand/Model	Serial #	Condition	Case #	Bow #	Accessories

Amount Paid _____ Date _____

Issued By _____ Date _____

Do not issue instrument if Amount Paid field above is blank.

Received By _____ Date _____

Return this Agreement Form to the Reservation Office after camp.

Damaged Instrument Information

Fees _____ Damage _____

Due Date _____

Copy to Camper _____