

RISD School-Owned Instrument Check-out Form



A 1.1	
Address: null	Phone:
City:	State: Zip:
Parent/Guardian Name(s): Maria Reyes Amando D	ominguez Add'l Phone#(s):
Instrument Type / Make / Model: 4/4 / Paesold / 803E	Serial #: 7645403
District/ID Number: Ho	Student ID #: 338638
This is to certify that I am using a school-owned instrument. I und reverse of this form) and will observe all guidelines.	erstand the guidelines concerning use of my school instrument (found on the
Signed:	Date:
Student Musician	
I have read the guidelines for using a school-owned inst applies to my child.	rument (found on the reverse of this form) and understand how it
	REPLACEMENT VALUE
OF THIS INSTITU	IMENT IS: 1 025 00 1
OF THIS INSTRUMENT IS: 925.00 I hereby agree to hold myself personally and financially responsible for any damage or loss of the instrument while it is in my care. I understand that the RISD does not provide off-campus insurance coverage for damage/theft of this instrument. I will allow no other person than the student designated above to use the instrument. I agree to maintain the instrument in its current condition and return it when requested by the director.	
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