



**UMBC RECREATION
EQUIPMENT CHECKOUT REQUEST FORM
RAC EQUIPMENT ROOM
410-455-1546**

CONTACT INFORMATION

Name:	Day & Date of Event:
Email:	Pick up Date: by 5pm
Phone:	Return Date: by 5pm
ID Number:	CAMPUS AFFILIATION
Event Type:	Student:
Event Description:	Faculty/Staff:
	Department:

Equipment Requested (List all items which are being checked out)	

By checking out equipment I agree to:

- Return all items by the date and time above.
- Equipment is free of charge, however I agree to pay a \$10 late fee for equipment not returned by the date and time above.
- Requests should include the quantity and type of equipment and be submitted at least 3 days prior to the event.
- Pay the replacement cost of any LOST, STOLEN, or Damaged items while checked out in my name.
- All reservations are on a first come first serve basis; therefore UMBC Recreation cannot guarantee the availability of any equipment.

SIGNATURE: _____ DATE: _____

OFFICE USE ONLY	LATE / REPLACEMENT FEE DUE:	PAID:	RENTAL APPROVED BY:
RETURNED?	DATE:	TIME:	RETURN APPROVED BY: