

**EQUIPMENT RENTAL FORM**  
**(FOR EQUIPMENT USED OUTSIDE OF JOHNSON CENTER AND STUDENT UNIONS)**  
*Student Centers*  
 4400 University Drive, MSN 5A3, Fairfax, VA 22030-4444  
 Johnson Center - Room 324 - Phone 703-993-2921 - Fax 703-993-2919

Date \_\_\_\_\_

**REQUESTOR INFORMATION**

Organization/Department \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Index Number \_\_\_\_\_

**LOAN INFORMATION**

Pick up time/date \_\_\_\_\_

Return time/date \_\_\_\_\_

Location of Event \_\_\_\_\_

\_\_\_\_\_

| ITEM                     | QUANTITY | COST PER UNIT/PER DAY | TOTAL |
|--------------------------|----------|-----------------------|-------|
| TV/DVD/VCR               |          | \$40.00               |       |
| Slide Projector/Overhead |          | \$28.00               |       |
| Table Skirt              |          | \$5.00                |       |
| Floor Podium             |          | \$55.00               |       |
| Amplified Podium         |          | \$96.00               |       |
| Pipe & Drape (6ft panel) |          | \$13.00               |       |
| Whiteboard/ Tripod Easel |          | \$5.00                |       |
| Chair                    |          | \$5.00                |       |
| Table                    |          | \$10.00               |       |
| Staging (per section)    |          | \$25.00               |       |
| Stanchions (per section) |          | \$10.00               |       |
| "Rush" Fee               |          | \$25.00               |       |
| Return Check Fee         |          | \$25.00               |       |
| <b>Totals</b>            |          |                       |       |

**FORM OF PAYMENT**

Cash       Check

Journal Voucher

Check Request

*Make checks payable to  
George Mason University*

**RENTAL AGREEMENT**

- *Equipment must be picked up by requesting organization and returned by requesting organization.*
- *Request must be made at least 3 days prior to pick-up date. Other requests will be charged a rush fee of \$25.*
- *Equipment not returned on time will accrue an additional day rental charge plus a \$ 25 per day late return fee.*
- *Requesting Organizations will be held responsible for all damaged and missing equipment.*
- *This form also serves as an invoice. Payments should be made according to information on this form.*
- *George Mason University is not liable for any injuries or damages that occur while equipment is in possession of the requesting organization.*
- *Payment and/or authorized processing payment form must be received before request can be approved.*

Renters Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE ONLY**       Request Approved       Request Denied

Equipment Pick-up and Return Location \_\_\_\_\_ Total Charge \$ \_\_\_\_\_

Authorization Signature \_\_\_\_\_

|  |   |
|--|---|
| <b>Picked Up By:</b><br>(Print) _____<br>(Signature) _____ | <b>Returned By:</b><br>(Print) _____<br>(Signature) _____ |
|--|---|