

WHS EQUIPMENT USAGE FORM

NAME: _____

DATE: _____

INSTRUMENT: _____

MAKE/MODEL: _____

SERIAL NUMBER: _____

WHS # (the black & white number on the case): _____

OTHER ITEMS: _____

CONDITION: _____

COMMENTS: _____

I understand that it is my responsibility to keep this equipment in good working order and to return it to WHS in the same condition. It is my responsibility to fix the instrument should it develop mechanical problems other than normal usage. It is my obligation to replace all lost items.

_____/_____
Student Signature/Date

_____/_____
Parent signature/Date