Mountain Meadow Quilters
PO Box 3254
Sunriver, OR 97707

EQUIPMENT USE / RENTAL REQUEST FORM

Submission Date: _____

Requester's Name: _____ Requester's Email: _____

Equipment Requested:

(Please list each item with quantity. Add more lines if needed.)

1. _____ Quantity: _____
2. _____ Quantity: _____
3. _____ Quantity: _____
4. _____ Quantity: _____
5. _____ Quantity: _____

Date of Rental / Use (Start Date): _____ Date of Return: _____

Purpose of Use_____
_____

The requesting party agrees to pay Mountain Meadow Quilters Guild for any replacement of lost equipment, or repair of damaged equipment. Payment for damages, or replacement, is due within 14 days of return._____ ***Requesters initials.***

Special Instructions / Notes (optional):
_____
_____

Submitted by: _____ Date: _____

Approved By (Board Director): _____ Date: _____

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Returned in good repair _____ Board Member Name/initial _____