

Request to Use PTA Sound Equipment

Please fill out and give to VP of Events or PTA President at least one week before you need the equipment.

Name _____ Date _____

Phone # _____ Cell # _____

Committee Name _____

I will pick up the equipment on _____ and return it on _____

I will be using the following items (please check off **ONLY** those which apply):

Amplifier _____	Headset Wireless Mic _____
Mixer _____	Headset Wireless Mic _____
Speaker _____	Headset Wireless Mic _____
Speaker _____	Headset Wireless Mic _____
Speaker Stand _____	Headset Wireless Mic _____
Speaker Stand _____	Handheld Mic Set (3) _____
Boom Mic Stand _____	Handheld Mic Set (3) _____
Electrical Strip _____	100 Ft. Snake _____
50 Ft. Speaker Cable _____	Mic. Cables _____
50 Ft. Speaker Cable _____	

I understand that the sound equipment is fragile and valuable and agree to accept full responsibility for returning the equipment on the date above. I understand that only adults should have access to the sound equipment. In the case of any damaged or missing equipment, I will notify the PTA President or VP of Events when it is returned so that steps can be taken to see that it is fixed or replaced.

Signed: _____

Received in
good condition by: _____ Date: _____

Counted and returned
in good condition: _____ Date: _____

(VP of Events or PTA President)