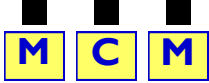


**Millis Community Media  
Equipment Request Form**



900 Main Street Millis, MA 02054  
508-376-7057 Email: cable@millis.net www.millismedia.org

Please use this form to request equipment. Equipment is your responsibility once you sign it out. Minors must have a parent or guardian's signature. Please be prompt for all pick-ups/returns. For information contact the studio at 508-376-7057 or cable@millis.net. An MCM staff member must certify users in order to release the equipment being requested below. Requests must be made at least 48 hours in advance.

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Organization: \_\_\_\_\_

Equipment to be used:

Item	Cost	Date Out	Date Returned
_____			
_____			
_____			

I agree to pay full repair or replacement charges for damages incurred while this equipment is in my care.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Staff: \_\_\_\_\_