

TODAY'S DATE: _____

DATE OF EVENT: _____

EQUIPMENT LENDING REQUEST FORM

PICK UP DATE & TIME: _____ RETURN DATE & TIME: _____

EVENT: _____

ORGANIZATION: _____

*CONTACT PERSON: _____ TELEPHONE: _____

ITEMS BEING LOANED

QUANTITY

DESCRIPTION

BLDG LOCATION

QUANTITY	DESCRIPTION	BLDG LOCATION

COMMENTS: _____

I understand that the above indicated items are being loaned to me by Oak Grove Baptist Church and that should they be damaged while in my possession, I will be responsible for making necessary repairs or replacement. I also understand that I am to return these items by _____.

SIGNATURE OF PERSON MAKING REQUEST: _____



(To be filled in by Trustees)

REQUEST APPROVED BY: _____ ON THIS DATE: _____

WAS RECORDED IN THE OFFICE BY: _____ ON THIS DATE: _____