1. **Process**
	* All Organizations must submit a media services request through <http://helpdesk.saintleo.edu/HomePage.do?logout=true> for all media service request
	* If Media Services is unable to perform your request, then the following organization can put in a media request form through the Office of Student Activities
	* Media Request form must be submitted to office for review no later than 48 hour prior to the approved event. **NO LAST MINUTE REQUEST WILL BE ACCEPTED**
	* Form must be turned in with a copy of your approved event form
	* Organization must realize that even though they turn in a Media Request Form, it does not guarantee that they will receive equipment
	* Once request is approved, items must be picked up prior to 5pm on the date of the event, and returned no later than 12:00pm the following day. Organization must work with campus safety in storing back items either in storage closet, or having campus safety take a hold of it.
2. **Regulations & Equipment**
	* All equipment reserved is the sole responsibility of the individual and the organization for which it was reserved.
	* Sound equipment must be returned together to ensure that it can be checked in and processed together. We will check for damage and missing equipment at the time of return.
	* Sound equipment is NOT PERMITTED to leave the Saint Leo University campus unless other different circumstances
	* If equipment is not returned entirely or not in the same condition it was when checked, the individual or organization responsible will be charged for damages assessed per piece of equipment lost or damaged.

**ACCEPTANCE OF TERMS**

By signing this form, I acknowledge responsibility and assume the obligation for any loss or damage to the items listed in this document. I acknowledge and agree that for any loss or damage will be placed on my student/organizational account. As a member of the campus community, I understand that I am responsible for all materials checked out. I acknowledge that I forfeit any right to appeal any charges placed on my student account if I fail to complete the checkout/check-in procedural paperwork. I understand that I will be assess charges after the check in inspection.

Signature ­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check Out Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check In Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Office Use Only**

Date submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­\_\_\_\_

Received by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TECH EQUIPMENT CONTRACT**

# Organization:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of advisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of person responsible for equipment:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Event:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of event:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location of event:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pick-up time:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Drop off time:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will alcohol be served at the event? Yes No

Equipment:

\_\_ speakers \_\_ speaker cords \_\_ LCD projector

\_\_ microphone \_\_ microphone cords \_\_ DVD player

\_\_ amp \_\_ mixer \_\_ PA system

\_\_ speaker stands \_\_ wireless mic \_\_ mic box (cords)

\_\_\_ auxiliary cords

I understand that I am fully responsible for the tech equipment and that myself and/or my organization will be held responsible for any damages and/or repair/replacement costs.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date