

RONCALLI COLLEGE OUTDOOR EDUCATION DEPARTMENT

Name: _____

Class/Group: _____

Date required: / / Expected Return Date: / /

OFFICE USE ONLY

Payment Received _____

Date / /

REQUEST FOR HIRE OF OE EQUIPMENT

*This request form should be handed to the office with your **\$10 attached** at least three days before the equipment is required.*

Please note that payment of **\$10.00** is required before any equipment will be given to you.

ITEM NAME	QUANTITY	SIZE	OFFICE USE (Record Item No.s)

Student to sign on receipt of equipment: _____

Name: _____

PLEASE RETURN THIS SLIP WITH THE EQUIPMENT TO THE COLLEGE OFFICE BY / /

An **additional \$10** will be charged if the equipment is not returned by the expected date above in a clean and dry condition.

Teacher to sign on return of equipment: _____