

Last Chance Nordic Ski Club Rental agreement

Rented

Returned

Name		
Address		
City	State	Zip
Home phone		Other Phone
Email address		
Weight of child		Shoe Size
	Inventory Number	
Ski		
Boot		
Pole		
Payment	___ cash ___ check ___ card check #:	Amount

I accept full financial responsibility for the equipment listed on this form. I promise to return it clean and undamaged by the agreed to time and date, and if I fail to do so, I will pay the full rental value of any additional days, and I will cover any cost for cleaning, repair or replacement of the equipment necessary at the full retail rate, as determined by the LCNSC. _____INITIAL

Parent Signature _____ date _____