SCHOOL DISTRICT OF HILLSBOROUGH COUNTY Tampa, Florida

SCHOOL-OWNED MUSIC INSTRUMENT CONTRACT

Schoo	l:	Year:			
	Direction	ons: Please complete a	ll grey areas legi	bly in blue	/black ink.
Student					
Address:					
City:			State:		Zip:
Phone:					
Instrument:					
Serial Nur	nber		BPI Number		
Approximate	value of t	this instrument at time	loaned is \$		
CONDITIONS OF LOAN Please initial all grey boxes to indicate acceptance of each loan condition I accept full responsibility for the instrument that has been loaned to me.					
	I agree to return at the end of the school year, and/or present it for inspection promptly when asked to do so by the Director. I agree to exercise proper care in the use of this instrument and to pay for				
	any damages incurred by my misuse, negligence or carelessness. I agree to allow no other person to play this instrument unless specified by the Director.				
	I agree to pay for the replacement of the instrument if it is lost, stolen, or destroyed.				
I agree to promptly present the instrument for inspection when requested to do so by the director.					
Student Signature:				Date:	
Parent Signature:				Date:	