|  |  |
| --- | --- |
| Student Name: Click or tap here to enter text. | Student ID #: Click or tap here to enter text. |
| Phone #: Click or tap here to enter text. | S&T Email: Click or tap here to enter text. |
| Ensemble: Click or tap here to enter text. |  |

*A green text on a black background

AI-generated content may be incorrect.*

Missouri S&T Arts, Language, & Philosophy  
**Instrument Usage Contract**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | Instrument: | Click or tap here to enter text. | | Brand: |  | | Serial #: |  | | Condition: |  | | Location: |  | | |  |  | | --- | --- | | Accessories: | Click or tap here to enter text. | | Date Checked Out: |  | | Date Usage Ends: |  | |

**TERMS OF USE:** I understand that the instrument and accessories described above are owned by the Curators of the University of Missouri. I acknowledge that I am currently enrolled as a student at Missouri S&T and that I must remain enrolled to be allowed to use the instrument. I understand that I may only use this instrument for either personal practice or for performance in an approved Missouri S&T ensemble and that use outside of these parameters is strictly prohibited.   
**MAINTENANCE & STORAGE:** I understand that I am responsible for the basic upkeep of the instrument in order to keep it in good playing condition and that I will be financially responsible for doing so. I understand that when not in use, the instrument must be kept in its case and securely stored either in its assigned Location indicated above, or in my possession. I understand that the instrument may not be in flawless condition upon receipt and that it is my responsibility to report any existing damage on the bottom of this form. I understand that it is my responsibility to report any damage to the instrument while in my possession as soon as it occurs. FINANCIAL   
**RESPONSIBILITY:** I understand that should the instrument become lost or stolen, I will be held financially responsible to the university for the replacement cost of the instrument. I also understand that I will be held financially responsible for any repair costs to the instrument that are deemed to be beyond reasonable wear-and-tear. I acknowledge that any repair or replacement costs will be charged to my student account. If these costs are not paid, a financial hold will be placed on my record.  
**RETURNING INSTRUMENT:** I understand that the instrument must be returned by the Date Usage Ends indicated above and if it is not, the instrument will be considered lost and I will be held financially responsible as prescribed above. I understand that any breach of this contract will result in me having to immediately return the instrument and forfeit my right of usage for this, or any like instrument for the remainder of the academic year. I acknowledge that a breach of this contract may also exclude me from being able to use a university-owned instrument in future years.  
  
By signing, I freely and voluntarily agree to the above statements.

|  |  |  |  |
| --- | --- | --- | --- |
|  | |  | | --- | |  | | Date | |

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| --- |
|  |
| Faculty/Staff Signature |