



# Equipment Rental Agreement

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

Organization: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Secondary Phone Number: \_\_\_\_\_

I, the undersigned, acknowledge receipt of the following equipment that I agree to rent from the Cooper's Crossing Residents' Association. I agree that this equipment will be returned by the date outlined in this agreement and in good working condition as I have received them.

\_\_\_\_\_ Tables      \_\_\_\_\_ Chairs      \_\_\_\_\_ Tent Canopies      \_\_\_\_\_ Other

The above equipment being rented is deemed to be in satisfactory working condition unless otherwise noted below.

Equipment Condition Details: \_\_\_\_\_

The rented equipment will be used on/at \_\_\_\_\_  
*Facility / Building / Address*

Rental Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

Rental Cost: \_\_\_\_\_ Security Deposit: \_\_\_\_\_

Security Deposit Cheque Information: \_\_\_\_\_

I agree to adhere to the rental terms outlined in this agreement and that all rented equipment will be returned in its entirety on or before the listed Return Date noted above and that all equipment will be returned in the same condition as it was rented. If any equipment is lost, stolen or damaged, I hereby guarantee replacement, repair or payment of the cost of repair or replacement to similar or better condition within one week of the return date noted above.

Signature: \_\_\_\_\_

Name (Please print): \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

**For Cooper's Crossing Residents' Association Only:**

Date Rented: \_\_\_\_\_ Date Returned: \_\_\_\_\_

Returned Condition: \_\_\_\_\_