



CAMPUS
camera
AND IMAGING

Rental Agreement

I, _____ have read the Campus Camera & Imaging Rental Program FAQ and agree to return my equipment by Noon on the day listed below. I understand that failure to return the equipment by Noon will result in a Late Fee of \$25 per day on top of the normal rental rates. I also understand that I have been offered Rental Insurance on the equipment that I am renting. I understand that I am liable for any Repairs or Replacement of any Abused or Broken Equipment or liable for the deductible on the Rental Insurance. I will return this equipment ONLY to the Campus Camera & Imaging store located at

1645 E. Main St.

Kent, OH 44240

If I have any questions, I can call (330) 678-1297 during normal business hours or email anytime at

campuscamera@hotmail.com

Equipment Rented

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Price

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Equipment Rental Begin Date – End Date

	<i>By Noon</i>
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Insurance

Yes No

Customer Signature & Date

Campus Camera & Imaging Rep
