

Hamilton-Wenham Community Access And Media, Inc. 775 Bay Rd

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Equipment Usage Agreement Form

Name: Or Street Address:			
Home Phone:	Work Phone:	E-mail:	
Program Title:			
Check-Out:/		a.m. / p.m.	Staff:
Check-In:/	_/	a.m. / p.m.	Staff:
Video:			
	adaptor & battery clip #:	Batteries:	
Tripod(s):	_ Monitors(s) #:	_	
<u>Audio:</u>			
Microphones: Handhe	eld: Lavalier:	Shotgun #:	Headphones:
Audio Mixer #:	Microphone Star	nd(s): Desk: F	Floor:
Cables:			
XLR to Mini: XI	LR to XLR: XLR to 1	/4": RCA to RC	A:
RF Cable: BNC	C to BNC: BNC to RO	CA:	
Adaptors:			
Accessories:			
Video Tape:	Extension Cord(s):	Power St	trip(s):
Light Kit #:	Other:		
am fully liable for loss	rtify that the above equipments of or damage to equipments & Procedures and I agre	t borrowed. I have read	
Member's Signature:			_ Date:
If under 18 years of a	ge, parent/guardian must si	ign to accept full respo	nsibility of member.
Parent / Guardian's Signature:			Date: