Florida Southern College
Nina B. Hollis Wellness Center
Outdoor Recreation Equipment Check-out Waiver

This Form is to be signed by all individuals who request to check out a piece of Outdoor Recreation Equipment from the Nina B. Hollis Wellness Center.

I, _____, acknowledge that by checking out (a) Florida Southern College _____ from the Nina
(List equipment to be checked out)
B. Hollis Wellness Center, I become responsible for it. I understand that if the equipment named above is lost, stolen, or damaged while in my possession, I will be held accountable for the replacement /repair cost of the above-mentioned equipment. I also understand that the equipment that I choose to check out from the Nina B. Hollis Wellness Center may come with some inherent danger associated with the use of said equipment. I also understand that the above checked out equipment is to be returned in a timely fashion to the HWC clean and free of damage, and the projected return date is to be listed below.

_____ I have read and understand the policies and procedures of the Florida Southern College, Nina B. Hollis Wellness Center, and Outdoor Recreation equipment check-out.

_____ _____
Participant Signature Witness Signature

_____
Participant phone #

_____ _____
Date Date

Date and time checked out _____ _____**AM/PM** **Desk Initials**____

Projected date and time of return _____ _____AM/PM

Actual Date and Time returned _____ _____**AM/PM** **Desk Initials**____

Inspection: _____ Clean / Dirty

_____ Working / Damaged

Price list for replacement if lost or returned damaged:

Tents	**Sleeping bag**	**Stove**	**Lantern**	**Flashlight**	**Cooler**	**Tools**	**Cook gear**
2 person $30	$25 each	$50	$40	$10 H2O proof	$30	Varies	Varies
4 person $40	**Camping Pad**	**Tarp**	**Other:**				
6 person $70	$10 each	$10					