



Murrieta Valley Unified School District
41870 McAlby Court
Murrieta, CA 92562

Usage Agreement for District Owned Musical Instruments

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Instrument: \_\_\_\_\_ Model/Brand: \_\_\_\_\_

OFFICE USE ONLY
Instrument Serial #: \_\_\_\_\_ Case #: \_\_\_\_\_
Included Accessories: swab cleaning cloth cleaning rod mouthpiece ligature
Music lyre reed case neck strap post
Condition: poor fair good excellent superior brand new
I request that my son/daughter be loaned the above described district-owned musical instrument or equipment for his/her use during the period specified below:
Beginning: \_\_\_\_/\_\_\_\_/\_\_\_\_ Ending: \_\_\_\_/\_\_\_\_/\_\_\_\_

It is my understanding that during the time my son/daughter is responsible for the instrument or equipment, he/she will furnish the following accessory items related to their instrument:

- valve oil slide cream or oil reeds swab (silk or cotton)
tuning slide grease small spray bottle case for multiple reeds valve brush
cleaning cloth swab (silk or cotton) cork grease mouthpiece brush cleaning snake

I will be donating a non-refundable usage fee of \$75 CASH (NO CHECKS) for the school year to Murrieta Valley Unified School District.

- I promise to return this instrument/equipment on or before the date indicated above.
I promise to immediately return instrument in same condition in which it was received, PROFESSIONALLY CLEANED, normal wear + tear exempted, when my student is no longer enrolled in WSMS band program and/or when director requires instrument due.
I will be responsible for the musical instrument or equipment and promise to pay for repair, if damaged, and for replacement, if lost or stolen.

Parent/Guardian Signature: \_\_\_\_\_
Address: \_\_\_\_\_
Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ e-mail: \_\_\_\_\_

I have received instruction on the proper care of this instrument and the items required for its use. I realize that by neglecting to follow these instructions I become responsible for paying for the repair, if damaged, and care of this instrument or equipment.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

RETURN TO BAND TEACHER FOR FINAL CHECKOUT + FILING

OFFICE USE ONLY

I approve this request: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_
Payment: Cash Check # \_\_\_\_\_ Amount: \$ \_\_\_\_\_