Kirtland Outdoor Rec Ski/Snowboard Equipment Rental and Liability Release Agreement

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Organization/Unit \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Base ID/DOD ID Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Equipment Check-Out Date: Equipment Return Date:

|  |  |  |
| --- | --- | --- |
| First Name | Middle Initial | Last Name |

**Terms & Conditions**

I understand that the binding system and helmet cannot guarantee the user's safety. In downhill skiing, the binding system will not release at all times or under all circumstances where release may prevent injury or death, nor is it possible to predict every situation in which it will release. In snowboarding, cross-country skiing, and other sports utilizing equipment with non-release bindings, the binding system will NOT ordinarily release during use; these bindings are not designed to release as a result of forces generated during ordinary operation. I understand that there are inherent and other risks involved in snow sports, for which this equipment is to be used, that injuries are a common and ordinary occurrence of the sport, and I freely and voluntarily assume those risks. I understand that ODR, 377 Force Support Squadron, nor their agents are responsible for loss or damage to personal property and will not be held liable for personal injury. By signing below; I acknowledge that I have read and understand all of the statements and conditions herein, to include the backside of this form. l, the undersigned, have read and understand this rental & liability release agreement. If equipment user is 17 years old or younger, I verify that I have the authority to enter into this agreement on behalf of the equipment user and I agree to be bound by all terms and conditions of this agreement.

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Helmet**: Yes/No Size: \_\_\_\_\_\_\_\_\_\_

**Age**\_\_\_\_\_\_ **Height**\_\_\_’ \_\_\_” **Weight** \_\_\_\_\_\_\_\_\_\_ **Skier Type** **( 1 , 2 , 3 )** Code\_\_\_\_\_\_\_ (Ski Only)

**SKI**: SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MODEL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ INV# \_\_\_\_\_\_\_\_\_\_\_\_ **DIN (L)** Toe\_\_\_\_\_ Heel\_\_\_\_\_

Boot SIZE: \_\_\_\_\_\_\_\_\_\_\_ POLES: YES / NO SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DIN (R)** Toe\_\_\_\_\_ Heel\_\_\_\_\_

**BOARD**: SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MODEL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ INV# \_\_\_\_\_\_\_\_\_\_\_\_

Boot SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ REGULAR or GOOFY Bindings\_\_\_\_\_\_\_\_\_\_\_\_ LEASH: YES / NO

**I certify that all of the information above is accurate and I understand the Terms & Conditions**

Equipment User’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_ Technician’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Legal Guardian’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- |
| Rental Item | Daily | 3 Day | Weekly | Other | Quantity | Total |
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|  | | | | | **TOTAL DUE:** |  |
| **Date:** | **Cash** | **Check** | **Charge** | **Cashier Initials** | **TOTAL PAID:** |  |

**Please Read Carefully By signing the bottom of this form I understand all of the information/conditions below**

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Helmet**: Yes/No Size: \_\_\_\_\_\_\_\_\_\_

**Age**\_\_\_\_\_\_ **Height**\_\_\_’ \_\_\_” **Weight** \_\_\_\_\_\_\_\_\_\_ **Skier Type** **( 1 , 2 , 3 )** Code\_\_\_\_\_\_\_ (Ski Only)

**SKI**: SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MODEL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ INV# \_\_\_\_\_\_\_\_\_\_\_\_ **DIN (L)** Toe\_\_\_\_\_ Heel\_\_\_\_\_

Boot SIZE: \_\_\_\_\_\_\_\_\_\_\_ POLES: YES / NO SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DIN (R)** Toe\_\_\_\_\_ Heel\_\_\_\_\_

**BOARD**: SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MODEL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ INV# \_\_\_\_\_\_\_\_\_\_\_\_

Boot SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ REGULAR or GOOFY Bindings\_\_\_\_\_\_\_\_\_\_\_\_ LEASH: YES / NO

**I certify that all of the information above is accurate and I understand the Terms & Conditions**

Equipment User’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_ Technician’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Legal Guardian’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Helmet**: Yes/No Size: \_\_\_\_\_\_\_\_\_\_

**Age**\_\_\_\_\_\_ **Height**\_\_\_’ \_\_\_” **Weight** \_\_\_\_\_\_\_\_\_\_ **Skier Type** **( 1 , 2 , 3 )** Code\_\_\_\_\_\_\_ (Ski Only)

**SKI**: SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MODEL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ INV# \_\_\_\_\_\_\_\_\_\_\_\_ **DIN (L)** Toe\_\_\_\_\_ Heel\_\_\_\_\_

Boot SIZE: \_\_\_\_\_\_\_\_\_\_\_ POLES: YES / NO SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DIN (R)** Toe\_\_\_\_\_ Heel\_\_\_\_\_

**BOARD**: SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MODEL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ INV# \_\_\_\_\_\_\_\_\_\_\_\_

Boot SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ REGULAR or GOOFY Bindings\_\_\_\_\_\_\_\_\_\_\_\_ LEASH: YES / NO

**I certify that all of the information above is accurate and I understand the Terms & Conditions**

Equipment User’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_ Technician’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Legal Guardian’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. I am responsible for checking equipment before leaving ODR. I verify that the visual indicator settings recorded on this form agree with the numbers appearing in the visual indicator window of the equipment listed on this form. Customer Initials: \_\_\_\_\_\_
2. I accept for use as is the equipment listed on this form, and accept full responsibility for the care of the equipment until returned, and inspected by ODR staff, whether or not the equipment is used. Customer Initials:\_\_\_\_\_\_\_
3. I will be responsible for the replacement at full replacement cost for any lost, stolen, or damaged of any equipment rented under this form. Once accepted equipment is my responsibility. Customer Initials:\_\_\_\_\_\_\_
4. I understand that equipment rental begins at the time of issue and ends at 1400 hours on weekday due date Equipment received after these hours, of the due date, is considered late. Late fee equals the 1st day rate of each rental items for each day late. Late fee will be charged on all late returns. Customer Initial: \_\_\_\_\_\_\_
5. I agree to return all rental equipment in clean and dry condition to avoid a cleaning fee. Customer Initials:\_\_\_\_\_\_\_
6. I will return all equipment to ODR staff during office hours. Rental equipment left unattended outside the facility will result in

First day rate charge of each rental item. No refund for early returns. Customer Initials: \_\_\_\_\_\_\_

Sponsor's Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_