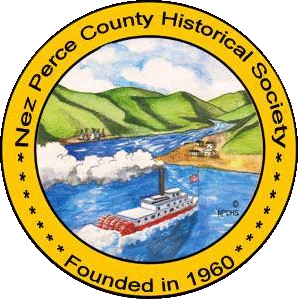
**Event Equipment Rental Form**



We are happy to be a part of your event and are excited to help make it happen. Please complete this form for our records. By signing this form you are acknowledging that any items lost or broken will be your responsibility to replace in a timely manner. If there are complications with any of the equipment you are using please give us a call and let us know.

The event items you are using were donated to the Nez Perce County Historical Society by Lewis Clark Recyclers. Your **$150.00 per event day suggested donation** for using these items will support the properties and programs of the Society.

Please check which equipment you will be borrowing and how many of each you are taking. The amounts listed are the replacement costs, not the total owed today. Please see attached pages for the liability waiver form to review and sign.

Chairs: X’s\_\_\_\_\_ $20.00/ea.

Tables: X’s\_\_\_\_\_ $150.00/ea.

Trailer: \_\_\_\_\_ $3,000

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of Renter:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Organization/Company Name:**

**­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Renter’s Phone Number:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Renter’s Signature:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Equipment Return Date:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date of Rental:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date(s) of Equipment Usage:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address of Event:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NPCHS Employee Signature:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_**

**Returned by Renter’s Signature: Date: Received By NPCHS Signature: Date:**

**(208)743-2535 | 0306 3rd St. Lewiston, ID 83501 | Tues. – Sat. 10:00 a.m. – 4 p.m.**