



EQUIPMENT CHECK OUT AND RETURN FORM

Division: _____

Coach Name: _____

Season: _____

Coach Phone #: _____ Check #: _____

EM Initials	Coach Initials	Equipment Description	Condition Issued	Cost to Replace	Qty.	Condition Returned	EM Initials	Coach Initials
		Hitting Net #		\$125	1			
		Catcher's Gear #		\$125	1			
		Hitting Tee		\$50	1			
		Practice Balls		\$7 Each	18/24			
		Game Balls	NEW	MUST RETURN				
		5 Gallon Bucket		\$5	1			
		First Aid Kit & Ice Packs		N/A	1			

I have received the above listed items and fully understand that it is my sole responsibility to return all of these items back to MVGSA upon the conclusion of the season. I fully understand that I am responsible for the replacement cost of the missing items at the prices listed above. If any items should break while in my possession, I shall immediately contact the MVGSA Equipment Manager to have the items repaired or replaced.

A deposit check not to exceed the amount of **\$350** (Includes all equipment checked out) will be held for the duration of the season. If the above equipment is not returned upon request the attached check will be deposited/cashed and will NOT be refunded.

CHECK-OUT DATE: _____

CHECK-IN DATE: _____

Coach Signature: _____

Coach Signature: _____

Equip. Mgr. Signature: _____

Equip. Mgr. Signature: _____