

## EQUIPMENT LOAN OUT FOR COMMUNITY EVENTS

SECTION 1: BORROWER INF	ORMATION			
Name:		Organization:		
Address:				
Mailing Address (if different):				
Phone Number:		Email Address:		
SECTION 2: EVENT INFORMA	ATION			
Event Name:		Event Date:		
Event Location:   Cold Lake	□ M.D of Bonnyville	□ 4 Wing	□ Other:	
SECTION 3: EQUIPMENT LOAN DETAILS				
Pick Up Date:		Return Date:		
Please list the equipment to be loaned:				
SECTION 4: EVENT STATISTICS				
Number of attendees by age and I				
0-5:	6-12:	13-17:		Adults:
Cold Lake: M.	.D Bonnyville:	4 Wing:		Other:
SECTION 5: ACKNOWLEDGEMENT AND DECLARATION				
I,, hereby acknowledge that the equipment identified in this form has been				
loaned to me/the organization I represent on a good will basis and free of charge. I will ensure the equipment remains				
available to the community by practicing care and attention when operating and cleaning it. I also acknowledge that I/we shall:				
<ul> <li>remain responsible for the equipment until it is returned.</li> <li>be responsible for any cost of replacement due to damage, loss, or theft.</li> </ul>				
• indemnify and save harmless the City of Cold Lake, its Agents, Directors, and Employees from all manners of claim,				
actions, and liabilities which may be suffered by any or all of the above use, however caused (use, transportation,				
etc.).				
Borrower Signature:		Date:		
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## 5513 48 Avenue, Cold Lake, AB • T9M 1A1 • Ph: 780-594-4494 • Fax: 780-594-3480

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