

## CTV Equipment Office Agreement

I have carefully read the CTV Production Manual in full, and I understand the procedures of the CTV Equipment Office. I agree to abide by these guidelines in my dealings with the Equipment Office and in my use of the CTV equipment. I accept full responsibility for the replacement cost of all items lost or broken while checked out under my name.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_