

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: _____