

## **Regent University Equipment Guidelines Agreement**

I have carefully read the Regent University Equipment Guidelines in full, and I understand the policies and procedures of the Equipment Office. I agree to abide by these policies and procedures, and I accept full responsibility for the replacement cost of all items lost or broken while checked out under my name.

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

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

\_\_\_\_\_

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

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

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

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

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