



Portable Equipment Request Form

Name: _____ Date: _____

Project/Location: _____

Pick-up Date/Time: _____ Return Date/Time: _____

Staff Approval: _____ Staff Return-Check: _____

Equipment Checkout List
(please note, substitutions may be made at the Staff's Discretion)

Item	Qty.	Reference	Item	Qty.	Reference
Camera Kits			Other Audio		
Canon GL2			4 ch. Shure Mixer		
Panasonic DVC-7			6 ch. Shure Mixer		
Camera Accessories			Mic Stands		
Hard Drive Recorder Kit			Headsets		
Flash Drive Recorder Kit			Other:		
Tripod			Cables		
Extra Batteries			XLR to XLR		
Mini DV Tape Stock			XLR to Mini		
Other:			RCA to RCA		
Microphones			Other:		
Sony Lavalieres			Adapters		
Sennheiser Handheld Mic			Specify:		
AT Shotgun Mic					
Sennheiser Wireless Kit			Miscellaneous		
Shure PZM Mic			Light Kit		
EV Dynamic Mic			Other:		
Misc. Wireless:					
Other:					

The Undersigned has checked the equipment and agrees that it is in working order. The undersigned assumes full responsibility for any damage to the equipment while in his/her possession. The undersigned also agrees to reimburse AWCA-TV for loss of or damage to such equipment by paying for the full market value replacement cost. Negligent handling for the equipment will result in the forfeiture of future studio rights.

Signature: _____ **Date:** _____
(must be signed by parent or guardian if volunteer is under 18 years)