

Harknett Musical Services Ltd.**Instrument Rental Agreement**Visit our website at www.harknettmusic.com2650 John St, unit 15,
Markham, Ontario, L3R 2W6
Local (905) 477-1141 • Fax (905) 477-5261**INVOICE #***The following information is REQUIRED to process agreement***2018/2019****Parent/Guardian Information**

Last Name		First Name		Home Phone	
Address		Apt. No.	City	Prov.	Postal Code
Email					
Drivers Lic.			Payment by: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Cheque* <input type="checkbox"/> Interac* <input type="checkbox"/> Cash*		
<i>* Note: payment by cheque, Interac or cash requires an additional deposit.</i>					
Visa/MasterCard Number				Exp.Date	
Employer (Yours or Spouse's)			Work Phone	Cell Phone	

Student Information

Last Name		First Name			
School	Band Director	Choice of Instrument	<input type="checkbox"/> New <input type="checkbox"/> Used	Protection Plan <input type="checkbox"/> Yes <input type="checkbox"/> No	

Terms and Conditions

- * All instruments are serviced, cleaned and thoroughly checked prior to delivery or receipt.
- * The care of the instrument is the responsibility of the *Lessee* and all damage other than normal wear is subject to charge.
- * Rental payments for the School-year Term are payable in advance for the full term. Ontario rentals are subject to applicable tax (13% HST).
- * Stolen instruments must be reported to the police department and evidence of reporting the theft must be delivered to Harknett Music within 5 days of the theft. Repairs to any damaged instrument must be completed by our service department unless otherwise authorized in writing.
- * A Protection Plan is available and covers up to 100% of the replacement value of the instrument. (**\$25.00 deductible**) Initials _____
- * I acknowledge the above terms and conditions agreeing to be responsible for the return of the rented instrument in good working order excluding normal wear on the return date. I will be responsible for any rental charges which occur due to late return of the instrument, and *authorize* the use of my credit card for payment of these charges.

I HAVE READ AND UNDERSTAND THE TERMS AND CONDITIONS

DATE _____ LESSEE SIGNATURE _____

FOR OFFICE USE ONLY**Comments:**

Renewal Due: _____ **Return Date:** _____ Taken Shipped/ Delivered By: _____**Thank You:****Rental Amount**

Accessories

Books

Protection Plan
(\$25.00 deductible)

Delivery

Subtotal

HST 13%

HST 5% (books)

Total

Instrument	Make	Model	Serial No.	Value	Initial
Instrument	Make	Model	Serial No.	Value	Initial