

# RENTAL AGREEMENT

Customer to fill in Shaded Area ACCOUNT #

INSTRUMENT		MODEL	SERIAL #	VALUE
NAME	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. (Parent or Guardian)	EMPLOYER		
MAILING ADDRESS		BUSINESS PHONE	EXT.	
STREET ADDRESS (if different)		SPOUSE'S NAME		
CITY	PROVINCE	SPOUSE'S EMPLOYER		
POSTAL CODE	HOME PHONE	SPOUSE'S BUSINESS PHONE	EXT.	
E-MAIL ADDRESS				
LESSEE'S BIRTHDATE (D/M/Y)	S.I.N.	STUDENT'S NAME		
BANK	BRANCH	STUDENT'S SCHOOL		
VISA or MASTERCARD #			EXPIRY	STAFF INITIAL

## RENTAL TERMS

- The minimum rental term is three months. Payments are due 3 months at a time in advance.
  - The first three month's rental, or 50% of the first year's rent can be applied toward the purchase of the instrument.
  - To cancel this agreement, the instrument must be returned to our premises.
- DO NOT RETURN THE INSTRUMENT TO THE SCHOOL.**
- Northwest Musical Services Ltd. may terminate this agreement in whole or in part if any rental payment is in arrears for thirty days or more.
  - Upon termination of this agreement, all rental arrears and cost of repairs if required, become due immediately.
  - Title and ownership of the instrument remains with Northwest Musical Services Ltd.
  - The lessee is responsible for freight to and from Northwest Musical Services Ltd. upon termination of this agreement, for repair, or otherwise.
  - The minimum out-of-town shipping and handling fee is \$15.00.
  - In case of theft, loss or irreparable damage to the instrument, the total value becomes payable in full immediately.
  - The lessee will be charged for damage to the instrument if it is willful, due to neglect or caused by a third party.
  - The lessee acknowledges that the instrument is received in good condition (dent free).
  - The lessee authorizes Northwest Musical Services Ltd. to bill the above noted credit card for all amounts due under this agreement.
  - The lessee understands and accepts the terms of this agreement.
  - School Term rental Sept. 1 - June 30.

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Office Use) <b>Plan</b>  AU <input type="checkbox"/> AN <input type="checkbox"/> E <input type="checkbox"/> ST <input type="checkbox"/>	<u>Method of Monthly Payment</u>  Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Pre-Authorized Payments <input type="checkbox"/>	<b>Rental \$</b> _____ <b>Shipping \$</b> _____ <b>GST \$</b> _____ <b>PST \$</b> _____ <b>Insurance \$</b> _____ <b>Total \$</b> _____
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