Friday Harbor Laboratories  Scientific Diving Program

Equipment Loan Form

Name ________________________________ Class/Program ____________________

contact info:
Cell phone number ___________________ E-mail address ____________________
secondary/additional email address? ________________________________
FHL Campus Address ________________________________
Permanent Address ________________________________

Borrowed Item(s)
Equipment loaned (if multiple, how many?). Describe in detail (brand name/color/size):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Date Borrowed ______________________ Planned Return Date __________________

Who authorized the loan of this/these item(s)? ________________________________
Signature ___________________________ Date __________________

BORROWER AGREEMENT
1. My signature here confirms that I intend to return this/these item(s) by the date listed above. Until that time, I understand that I am entrusted with equipment that belongs to Friday Harbor Labs, and will treat it carefully so that others may use it in the future.
2. I will return this/these item(s) by arrangement/appointment so that they may be thoroughly inspected/checked in by the Dive Officer or their designee.
3. I will not remove these items from San Juan County unless by arrangement. These items will only be used for scientific purposes approved by FHL staff.

Signature ___________________________ Date __________________