



LOCKER RENTAL CONTRACT

PLEASE PRINT

Last Name _____ First Name _____ MI _____ Date: _____

(____) _____
Home Phone _____ Email _____ UIN # _____

Please select the box that applies:

Student Faculty/Staff Faculty/Spouse Staff Retiree Graduate Graduate Spouse

TYPE OF RENTAL:

- Half Locker for Fall or Spring Semester (\$30)
- Half Locker for Summer Semester (\$15)
- Half Locker for one year (\$60)
- Full Locker for Fall or Spring Semester (\$45)
- Full Locker for Summer Semester (\$20)
- Full Locker for one year (\$90)

RENTAL AGREEMENT: I accept responsibility for the rental of the Campus Recreation Department locker, and acknowledge that I am responsible for any damages done to the rental property while the contract is in effect.

By signing this contract, I release the Campus Recreation Department from any responsibility for stolen, lost, or damaged property, and further acknowledge that I am responsible for providing my own lock.

I understand that by signing this Contract, it cannot be cancelled until the end of the contract period and that no refunds or pro-rating will be given for any reason.

Signature

Date

Privacy Notice: State law requires that you be informed of the following: (1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.

FOR OFFICE USE ONLY

DATE RECEIVED: _____

RECEIPT No.: _____

TOTAL RENTAL FEE PAID: \$ _____

PAYMENT TYPE: CASH

EXPIRATION DATE: _____

CHECK: # _____

ACCEPTED BY: _____

LOCKER #: _____

PLEASE DENOTE "M" FOR MEN'S LOCKER ROOM
AND "W" FOR WOMEN'S LOCKER ROOM