SUMMER EQUIPMENT CHECKOUT FORM

Date:	_
Player's Name:	-
Player's Team/Level:	
Parent/Guardian Name:	
Email Address:	
Street Address:	
Phone Numbers:	
Fee Paid: \$25 per player fee/\$100 deposit fee for hockey player gear and/or \$200 deposit fee for goalie appropriate fees paid); *** deposits will not be cashed & returned when gear is checked in	gear; (circle
Equipment to be returned on or before:	
Following is the equipment that has been lent from MCYHA inventory for the player's use.	
Description of equipment:	
acknowledge the receipt of the equipment described above in usab	
I,, acknowledge the receipt of the equipment described above, in usab acceptable condition. I agree to return the equipment on or before the date indicated. In the event of of through normal course of use, I agree to notify the Equipment Manager or MCYHA Board President as so In the event of equipment destruction or loss, I agree I will be liable for the cost to replace the equipment following rates: Skaters: Helmet \$50, Shoulder Pads \$25, Elbow Pads \$25, Breezers \$25, Shin Pads \$25, Sticks \$25; Goalies: Blockers \$50, Catcher \$50, Pads \$100, Helmet \$75, Stick \$50.	damage or wear oon as possible. nt at the
Parent / Guardian Signature:Date:	
MCYHA Equipment Manager Signature:	
*****************************	;
Equipment Returned Date:	
MCVHA Equipment Manager Signature:	