

Date of rental: _____

Instrument model: _____

Instrument Size: _____

Accessories: _____

Selling price of instrument: \$ _____

School year rental rate (10 months) \$ _____

Monthly rental fees: \$ _____

Deposit: \$ _____

Overdue charge: \$ _____

Renter name: _____	
_____	_____
Last Name	First Name
Address: _____	
_____	_____
Street	City

_____	_____
Province	Postal Code
Telephone: _____	
Cell Phone: _____	
Driver's License Number: _____	

(Renter is required to submit a copy of his/her photo I.D)

雅歌提琴



Rental No. _____

tel: (604) 326-0086
fax: (604) 326-1130