(School Name) High School (Department Name) Department

Equipment Inventory List

Camera Kit #

Item No.	ltem(s)	Serial Number
1	Camera Body	#####
2	Lens	#####
3	Lens	#####
4	SD Card	
5	Battery	Varies
6	Camera Bag	Bag
Total:		
6		

(School Name) High School Career & Technology Education Department

By signing this form, you agree to the guidelines listed in the Equipment Release Agreement. Items checked out are due back on the following school day to the date checked out(Monday if checked out on Friday) before classes begin. Failure to do so will result in checkout privledges being revoked.

Date	Student Name (Print & Sign)	ID Number	Returned