Media Equipment Reservation Form

Name: __________________________________________________

Today’s Date: ____________  Today’s Time: _________ (am/pm)

Needed From (day, date, time): _______________________ (am/pm)

Needed To (day, date, time): _________________________ (am/pm)

Location equipment will be used: _____________________________

### Equipment To Reserve

*Check all that apply*

- Audio Cassette Player
- CD-Rom Player (Boom Box)
- Data/Video Projector
- Digital Camera (Still Images)
- Digital Video Camera
- DVD Player
- DVD/Television Combo
- DVD Recorder
- Flip Chart/Dry Erase Board
- Flex Camera/Visualizer
- iPod
- Laser Disk Player

### Pick Up and/or Delivery To Site

- [ ] I will pick up the equipment in the library on ____________ (date)
at ____________ (am/pm). _____________________ (student) will be responsible for pick up and delivery to site.

- [ ] Please deliver and set up equipment on ________________ (date)
at _____________ (am/pm).

### Return and/or Pick Up From Site

- [ ] I will return equipment to the library on ________________ (date)
at _________ (am/pm). _____________________ (student) will be responsible for equipment return from site.

- [ ] Please pick up my equipment at the site on ______________ (date)
at _________ (am/pm).

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Equipment To Reserve (continued)

- Microphone(s) #____
- Microphone Stand(s) #____
- Overhead Projector
- Portable Radio/CD Player
- Portable Screen
- Public Address Unit
- Recording Cart (for teacher certification process)
- Slide Projector
- Sound System (Celestial)
- TV/Receiver
- VCR/TV Combo
- Other ____________________

Accessories

(Check all that apply)

- Blank Audio Cassette(s) #____
- Blank CD-Rom(s) #____
- Blank DVD-R(s) #____
- Blank Video Cassette(s) #____
- Erase
- Flip Chart Paper
- Lectern/Podium
- Mobil Equipment Cart
- Slide Tray
- Screen, Size_______
- Travel Case for ____________
- Tripod for ____________
- Other ____________________

Special Instructions

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09/09/10