

SHARON SPRINGS CENTRAL SCHOOL
PO BOX 218
Sharon Springs, New York 13459
(518)-284-2266

I am borrowing the following items from the Sharon Springs Central School:

1. _____
2. _____
3. _____
4. _____

I understand that I am totally responsible for the item(s) listed above and that they will be returned in good working order and in the same condition as when they were borrowed.

If they are not returned as agreed, I will replace them to the satisfaction of the Superintendent or the Principal of the Sharon Springs Central School immediately.

I agree the above will all be returned on or before _____.

Approved by:

Superintendent's Signature

Borrower's Signature

Borrower's Address

Borrower's Phone Number

Name of Contact Person

Returned Satisfactorily: _____
Signature Date