Lionel Hampton School of Music Summer Key Renewal Form

Summer Contact Information:

Name:	First		_		
			_		
E-Mail:					
Phone:					
Current Address:					
	Street	City	St	Zip	
Justification of Use	e over the Summe	er:			
 I understand and I also understand anyone and not I understand my I understand the 	d will abide by all appli d that the keys issued to be reproduced. responsibility for the s re will be a hold place	ne are the property of the control o	lines for ro and perso e rooms th unt and a o	oom and build onal use, not ney unlock.	to be lent to
Signature		Date			
Keys Renewed:					
Bldg.; Room					
Faculty approval					
Director's approval					