**JAMM Audio/Video Equipment Check Out**

Name: ___________________________________________ JAMM _________ (class #)

Phone: ___________________ E-mail: __________________________________________

Date/day requesting (now): __________ Time requesting (now): __________

Date/day you will check out (pick up): __________ Time checking out: __________

Date/day returning: _________________ Time returning: ________________

<table>
<thead>
<tr>
<th>EQUIPMENT</th>
<th>ITEM REQUESTED</th>
<th>ITEM ISSUED</th>
<th>ITEM RETURNED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>(student initials)</td>
<td>(employee initials)</td>
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</tbody>
</table>

**CAMERAS**

Panasonic Video Camera
Panasonic Shoulder Vid. Cam
Panasonic GH DSLR
Canon DSLR
Other (specify)

**CAMERA ACCESSORIES**

Lens Cap
Battery (small or large)
Tripod w/Quick Release
Fig Rig w/Quick Release
Monopod w/Quick Release
Charger/AC Adapter
Conversion Lens (type)
Filter (type)
Rain Cover
User Manual

**LIGHTING**

Lowel Tungsten Kit
Lowel Fluorescent Kit
LED/Battery Light
Small Bescor Portable Light
Clip Light w/lamp
Reflector

**AUDIO**

Tascam Digital Audio Recorder
Shotgun microphone
Lavalier micr w/clip & windsreen
Stick/Hand microphone
XLR (indicate size w/ S,M,L or mini)
Shockmount
Fishpole
Headphones

**OTHER EQUIPMENT**

Glidecam

**Notes:**

READ AND SIGN THE BACK OF THIS FORM OR IT WILL NOT BE PROCESSED.
### Checkout Sheet for Video Equipment

**READ COMPLETELY AND SIGN BELOW. WHEN YOU CHECK OUT EQUIPMENT MAKE SURE YOU PHYSICALLY HAVE EVERYTHING THAT YOU ARE BEING HELD RESPONSIBLE FOR. PLEASE TREAT THE EQUIPMENT AS THOUGH YOU PAID FOR IT. DO NOT LEAVE IT IN CARS OR UNATTENDED.**

1. I understand that by signing this form I accept full responsibility for the care and safe return of this equipment.
2. I understand and agree to pay all costs associated with damage or replacement for any equipment and/or its associated peripheral equipment should it be lost, stolen, or damaged while it is checked out to me. I will operate the equipment in accordance with the user manuals detailing proper operation & maintenance of equipment.
3. I understand this equipment is due within 24 hours of when I checked it out (except on weekends).
4. If I do not return the equipment when it is due, I may be denied further equipment reservations.
5. School of Journalism and Mass Media equipment and facilities are for use only by students registered in JAMM audio/video production courses in a given semester. Permission for use of equipment and facilities will not be granted to any other parties. JAMM equipment and facilities are to be used by registered students only for work assigned in those audio/video production courses. No outside work or personal projects are allowed.

<table>
<thead>
<tr>
<th>Student’s name (printed)</th>
<th>Equipment manager’s name (printed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student’s signature</td>
<td>Equipment manager’s signature</td>
</tr>
</tbody>
</table>

Did the student test the equipment before leaving?

**YES:**

**NO:**

Equipment checked in by: ________________________________ (print name)

Equipment checked in date/time: ______________________

Are all items accounted for and in good working condition?

Notes:

__________________________________________________________________________

__________________________________________________________________________