

EQUIPMENT SIGN OUT AND RETURN SHEET

NAME _____ **CLASS OF** _____ **DATE** _____

JERSEY

HOME# _____ **AWAY#** _____ **PRACTICE COLOR** _____

HOME: CONDITION RECEIVED EXCELLENT _____ GOOD _____ FAIR _____ POOR _____

AWAY: EXCELLENT _____ GOOD _____ FAIR _____ POOR _____

PRACTICE JERSEY: EXCELLENT _____ GOOD _____ FAIR _____ POOR _____

LIST ANY REPAIRS NEEDED _____

PANT COVER

CONDITION RECEIVED EXCELLENT _____ GOOD _____ FAIR _____ POOR _____

LIST ANY REPAIRS NEEDED _____

SOCKS

RECEIVED HOME _____ **AWAY** _____ **PRACTICE** _____

RETURNED HOME _____ **AWAY** _____ **PRACTICE** _____

EQUIPMENT BAG

CONDITION RECEIVED EXCELLENT _____ GOOD _____ FAIR _____ POOR _____

LIST ANY REPAIRS NEEDED _____

COACH SIGNATURE _____ **CONDITION AGREE** _____ **DISAGREE** _____

I EXCEPT RESPONSIBILITY FOR THIS EQUIPMENT, AS PROPERTY OF THE WALLED LAKE NORTHERN HOCKEY. I WILL IN GOOD FAITH KEEP THIS EQUIPMENT IN THE CONDITION THAT IT WAS ISSUED IN, AT THE START OF THE HOCKEY SEASON.

PLAYER SIGNATURE _____ **DATE** _____

I WILL BE CONTACTED AND COULD BE HELD FINANCIALLY RESPONSIBLE FOR ANY LOST, STOLEN, DAMAGED OR NOT RETURNED EQUIPMENT.

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____

EQUIPMENT RETURN SIGNATURES

COACH _____ **DATE** _____

PARENT REP. _____ **DATE** _____

PLAYER _____ **DATE** _____