

Brown County Beekeepers Association Rental Agreement

1. LESSOR INFORMATION:

Brown County Beekeepers Association
PO Box 10371
Green Bay, WI 54307-0371

2. LESSEE INFORMATION:

Name: _____ Phone: _____

e-mail: _____

Rental Start Date _____ Return Date _____

Rental Fee: _____ Security Deposit _____

3. EQUIPMENT SUBJECT TO LEASE (Select one).

Two frame extractor with stand

Four frame extractor with stand

Infrared Camera

Other: _____

4. RENTAL FEE PAYMENT TERMS: Payment via check written out the Brown County Beekeepers Association is due at the time the equipment is picked up. In the event that the item(s) are not returned or are returned in a state that renders the item(s) unusable the Lessee agrees to pay the full price for an in kind replacement.

5. SECURITY DEPOSIT: In addition to the rental fee, the Lessee shall pay a security deposit of \$25 by check to the Brown County Beekeepers Association prior to receiving any equipment and at the time this Agreement is signed. If the equipment is returned dirty OR not in proper working order the entire security deposit will be used to cover the cost of cleaning. Any amounts refundable to the Lessee shall be paid at the time this Equipment Rental Agreement is terminated.

6. PICKUP AND DELIVERY: The lessee is responsible for pickup and delivery of the equipment at a time and place specified by the Club. It will not be delivered.

7. CARE AND OPERATION: The equipment shall only be used and operated in a careful and proper manner. Lessee assumes all responsibility for proper use of the equipment.

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8. LIMITATION OF LIABILITY: In consideration for being allowed to use this equipment, I release from liability and waive my right to hold liable Brown County Beekeepers Association (BCBA), their officers, volunteers and agents (collectively BCBA) from any and all claims, including claims of BCBA's negligence, resulting in any physical injury, illness (including death) or economic loss I may suffer or which may result from my participation in this activity or any events incidental to this activity.

I am voluntarily participating in the use of this equipment. I understand that there are risks associated with using this equipment, such as physical and/or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability, death or economic loss. These injuries or outcomes may arise from my own or other's actions, inactions, or negligence, or the condition of the equipment, activity, activity location(s) or facility(ies).

Nonetheless, I assume all risks using this equipment, whether known or unknown to me, including picking up and returning equipment, travel to and from the location where the equipment, activity or any events incidental to this activity occur.

I agree to hold BCBA harmless from any and all claims, loss or damage to my personal property, liabilities and costs, including attorney's fees, as a result of my use of this equipment. If BCBA incurs any of these types of expenses, I agree to reimburse BCBA.

I have read this document, and I am signing it freely. I understand the legal consequences of signing this document, including (a) releasing BCBA from all liability, (b) waiving my right to sue BCBA, (c) and assuming all risks of using the equipment and participating in this activity.

If I need medical treatment as a result of my use of this equipment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware that BCBA does not provide health insurance for me and that I should carry my own health insurance.

I, _____, agree to the above terms and to return the equipment clean and in good working order.

Signature _____ Date _____