



LOVELAND VIOLIN SHOP

MICK LOVELAND • Dealer • Restorer

618 Fourth Street, Suite 207

Santa Rosa, California 95404

707 • 526-9777

Date _____

RENTAL AGREEMENT

I have this day rented and received from Loveland Violin Shop, owners,

for which I agree to pay as follows:

_____ per three month rental period. Six months of rent may be applied toward the purchase of this instrument or another of better quality. Failure to pay promptly at the beginning of each 3-month rental period will result in a service charge of 18% per annum (or 1-11/2% per month). I agree to safeguard the outfit from loss or damage while entrusted to me, and to indemnify the owner against all loss. I further agree to return the instrument upon demand, in its present condition, ordinary wear and tear from use excepted. The instrument shall not be removed from the Northern California area without the consent from the Loveland Violin Shop.

Signed _____ Print _____

Street Address _____

City, State, Zip Code _____

Phone (home) _____ (cell) _____

Email _____

Visa or Mastercard # _____

Exp. Date _____ VIN # (back of card, last 3-digits) _____

(At the beginning of each 3-month rental period we will automatically charge your credit card.)

Employer name, address and phone # _____
