Application for Use of PA System



There will be a \$25.00 reservation fee for upkeep of the equipment.

Requestor Information

Organization Name:		
Contact Person:		
Address:		
City:		Zip Code:
Phone:		
MTSU Email (no outside e		
	Event Information	
Title of Event:		
Location of Event:		
Event Date/Time:	Return Date:	
Date to Pick Up PA Syster	n:	
which it was checked o	return the equipment in the so ut. In the event there are dan narged the repair or replacem	nages to the equipment,
Item	Initial Out (Requestor)	Initial In (Office Use Only)
Speakers (2) and System		
Power Cord		
Microphone		
Microphone Cord		
Auxiliary Cord		
Speaker Cord (2) Stand (optional)		
Stand (Optional)		

2

3

Payment: Cash

Check #:

1

Tag ID Number: