AAC LENDING LIBRARY LOAN AGREEMENT

| Due Date : | | |
|------------|----------------|--|
| | Date of birth: | |
| | | |
| | Due Date : _ | |

| Check Items | Equipment | Serial Number or Inventory Number | Replacement Cost |
|----------------|--------------------------------------|---|------------------|
| | iPad | | \$685.00 |
| | iPad Mini | | \$399.00 |
| | Go Talk One | | \$79.00 (6) |
| | Go Talk 4+ | | \$159.00 |
| | Go Talk 9+ | | \$179.00 |
| | Go Talk 20+ | | \$199.00 |
| | Step-by-Step with Levels | | \$206.00 |
| | Attainment's Pictures That Talk Book | | \$32.00 |
| | Other: | | |
| TOTAL F | TOTAL REPLACEMENT COST | | |

BORROWER'S RESPONSIBILITY AND LIABILITY

I understand and agree that I am responsible for proper handling and use of the loaned device(s), and assume financial liability for it during the loan period. I am responsible for returning all components to the Down Syndrome Connection of the Bay Area AAC Lending Library in a timely manner. If the items are not returned by or in case of loss or damage, I will be held financially liable and my credit card will be charged for the replacement value of the item(s) listed on the Loan Agreement Form. The total replacement value of the item(s) borrowed is \$_____ In the case of theft, I will not be held responsible, as long as I immediately report the incident to the police and provide a copy of the police report to the Down Syndrome Connection of the Bay Area. I understand it is illegal to copy or distribute any software or apps loaned through the Down Syndrome Connection of the Bay Area AAC Lending Library. Upon completion of the loan period, any content (e.g., music, photo's, documents) created by the borrower will be deleted. Additionally, if I have loaded software or app's on my device, I will remove them. Signature of Card Holder Date Name on credit card: Phone #'s: Home _____ Work ____ Cell ____ Billing Address City _____ Zip _____ Credit Card #: _____ Card type: _____

Expiration Date: _____ CSC:

RELEASE OF LIABILITY

| Printed Name of Card Holder | |
|---|---|
| I agree to indemnify and hold harmless the Do and all employees, agents or representatives of (including death) to myself, and/or any other poexpenses, claims, demands, suits, and actions Connection of the Bay Area, and any and all er in connection with loan(s) from the Down Synd Library. | erson, and any other losses, damages, by any party against the Down Syndrome mployees, agents or representatives of same, |
| Signature of Card Holder | Date |