

alan gordon enterprises

	. /	fessional Motion Picture and Video Equipment: Rental - Sales - Service - Manufacturing					
	5625 Melrose Ave, H www.alang	ollywood, CA 90038 • Phoi ordon.com	ne: 323.466.3561 ● Fa rental@alangord o				
CRPRI	Attn:	From:					
Please return th	nis form with copies of yo	our U.S. Government ph	oto ID (or passport)	and student ID.			
Student Rental Application							
Account Information							
Name							
Street Address							
City, State, Zip							
Phone No. 1			Cell	Home			
Phone No. 2			Cell	Home			
E-mail Address			Fax No.				
	Applicant	's Credit Card Inform	ation				
(Must be in the same name as the Applicant)							
Type of Card	American Express	MasterCard	Visa				
Name on Card			Security Code				
Credit Card No.			Expiration Date				
Issuing Bank			Bank Phone No.				
Applicant's Driver's License Information							
Driver's License #			State of Issue				
School Information							
Name of School							
School Address							
Major/Dept.							
Contact Name			Contact Phone				
Print Name							
	Cignoturo		Data				

Insurance Information

Please check one:	This project is independent of my class work		This project is for a class				
Name of Class							
Instructor's Name			Instructor's Ph. #				
Please check one:							
I will leave a full value deposit in the form of a hold on my credit card or cash.							
I will use insurance provided by my school.							
School's Risk Manager							
Address							
Risk Management	Phone #						
Alan Gordon Enterprises, Inc. as "loss payee, additionally insured" for the rental of all equipment. The coverage must equal or exceed the replacement value of all rented equipment. The insurance certificate must be valid for the duration of the rental period. If A.G.E. agrees to extend the time of the rental contract, the Applicant is responsible for obtaining and providing A.G.E. with a certificate of insurance covering the extended rental period. Insurance must be provided for coverage of the equipment in transit and for unattended auto. The Applicant may be responsible for leaving a deposit equal to the deductible amount for loss payee coverage and/or additionally insured coverage, whichever is greater, as stated on the insurance policy.							
Personal Guarantee							
	•						
	5625 Melrose Ave. Hollywood, CA 90038						
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I agree to guarantee payment of any amounts due to Alan Gordon Enterprises (A.G.E). by the Applicant including amounts which become due now and in the future, together with the costs of collection and reasonable attorney's fees should it become necessary for A.G.E. to take legal action to enforce this Guarantee. I understand and agree that A.G.E. may enforce its rights under this Guarantee without its first having to proceed against the Applicant, apply any security which it may hold, or pursue any other remedy. I consent to the changing or extending by A.G.E. of the time, terms, or amount of payment which may be due or become due by the Applicant. My obligation shall not be affected by changing or extending the time, terms, or amount of payment that may be due or become due by the Applicant. I agree that any claims or rights that I have or may later have against the Applicant will be subordinated and postponed in favor of any claims which A.G.E. may have, now or in the future, against the Applicant.							
1	Print Name		_				
	Signature	Date	Date				

Please return this form with copies of your U.S. Government photo ID (or passport) and student ID.