

Sioux Falls Music Company
1209 W. 41st Street
Phone: 605-334-5361 or 800-994-5361
Fax: 605-334-6057

Customer information

Student's name: _____ (Please Print)

Parent (1) name _____ Birthdate: _____ SS#: _____ - _____ - _____

Address: _____ City/State/Zip: _____

Phone: () _____ - _____ Renting? _____ Own? _____ How long at address? _____

Employer
Parent1: _____ Address: _____

Phone # _____ Date Employed: _____

Email address: _____

Parent (2) name _____ Birthdate: _____ SS#: _____ - _____ - _____

Address: _____ City/State/Zip: _____

Phone: () _____ - _____ Renting? _____ Own? _____ How long at address? _____

Employer
Parent1: _____ Address: _____

Phone # _____ Date Employed: _____

Credit References

Bank Name:
(checking) _____ (savings) _____

Mastercard _____ Visa _____ Discover _____ # _____ - _____ - _____ exp: _____ -- _____

Nearest Relative (not living with lessee): _____ Phone #: _____

Sioux Falls Music Company agrees to lease to the above person(s) the specified instrument for 4 months from today's date. This property remains solely the property of Sioux Falls Music Company. This is not an offer to sell or a sales contract. Lessee agrees to pay for lost, stolen, or damaged property, the cost of collection of delinquent accounts and reasonable legal fees. Lessee hereby agrees to let Sioux Falls Music Company charge the above credit card appropriately should the lessee be in default. Lessee declares he/she is not a minor. Normal wear & tear is expected for the length of the lease term, to be solely determined by Sioux Falls Music Company. In the event of abnormal wear, damage delinquency, or abuse, Sioux Falls Music Company may at its sole discretion repossess or demand the return of the property, keeping the trial fee as liquidated damages. This document contains the entire agreement between Lessee & Sioux Falls Music Company.

Lessee's Signature : _____

Dated : _____

PLACE TAG HERE

Charge monthly rent to ___ above number, or _____ - _____ - _____ exp _____

Date lessee agrees to return property to Sioux Falls Music Company at 1209 W 41st Street, Sioux Falls SD Return Date: _____

Office Use Only

Beginner Trial Rental _____ Long-Term Rental _____ Length of Rental _____

Employee Initials : _____ Date : _____

Payment type : Cash _____ Check _____ CC Type _____