

Jimmy Osborne Music

a tradition in music



LEASE AGREEMENT
Please check one

- | | |
|-----------------------------------|--|
| <input type="checkbox"/> FLUTE | <input type="checkbox"/> ALTO SAX |
| <input type="checkbox"/> CLARINET | <input type="checkbox"/> VIOLIN |
| <input type="checkbox"/> TRUMPET | <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/2 |
| <input type="checkbox"/> TROMBONE | <input type="checkbox"/> 3/4 <input type="checkbox"/> FULL |

STUDENT NAME _____
 INSTRUMENT _____
 MAKE _____
 SERIAL _____
 SCHOOL _____
 MC/VISA# _____
 DL # _____

DO NOT WRITE IN THIS SPACE

The musical instrument described below is leased to the undersigned under the following terms:

- THIS LEASE EXPIRES ON _____, A late charge of \$1.00 per day will be made 7 days after the expiration date.
- The undersigned is fully responsible for the instrument and its return to JIMMY OSBORNE MUSIC, Inc. In the event of **damage beyond normal wear**, the signer is responsible for repair charges and agrees that all repairs will be made by JIMMY OSBORNE MUSIC, Inc. In the event the instrument is lost or damaged beyond repair the signer agrees to pay JIMMY OSBORNE MUSIC 70% of the current retail price regardless of the age or condition of the instrument. JIMMY OSBORNE MUSIC, Inc. shall be the sole judge in all cases.

In the event of default of the undersigned, all expenses incurred by JIMMY OSBORNE MUSIC under this agreement will be the responsibility of the undersigned and be due in full. In the event that the instrument is not returned, or repair charges have not been paid within 30 days, the undersigned authorizes Jimmy Osborne Music to charge the MC/VISA account listed above. In the event that this account goes into collection, the undersigned will be responsible for all collection charges, including reasonable attorney's fees.

- In the event the undersigned shall move from the address shown below, JIMMY OSBORNE MUSIC must be notified and shall have the right to cancel this agreement. There will be no refunds for early return of the instrument.

NO OTHER PARTY IS PERMITTED TO ACCEPT THE RETURN OF THE INSTRUMENT. THE INSTRUMENT MUST BE RETURNED TO ADDRESS SHOWN ABOVE ON THIS CONTRACT AND YOUR RESPONSIBILITY WILL NOT CEASE UNTIL IT IS. THIS AGREEMENT AND/OR INSTRUMENT IS NOT TRANSFERABLE.

SIGNATURE _____

DATE _____

DAMAGE PROTECTION - (optional) (Damage protection does not cover negligence due to dropping, bending, self-repairs, etc.)

FATHER NAME _____ EMPLOYER _____ ADD. _____ WK PHONE: _____ HM PHONE: _____	MOTHER NAME _____ EMPLOYER _____ ADD. _____ WORK PHONE: _____ HM PHONE: _____	STUDENT NAME _____ SCH. DIST. _____ Summer Fee \$ _____ Summer/School Fee \$ _____ School Fee \$ _____ Damage Protection \$ _____ ACCESSORIES \$ _____ SUBTOTAL \$ _____ SALES TAX \$ _____ TOTAL \$ _____
PARENT'S NAME _____ ADDRESS _____ CITY _____ NY _____ ZIP _____		
Date Paid _____ Check # _____		