

First Aid Kit Sign Out Form

First Name: _____ Last Name: _____

Student #: _____ Group Name: _____

Email: _____ Phone Number: _____

First Aid Kit Borrowed: Small Car Standard Survival Compact Daypack
Deposit Submitted: Yes - Amount: _____ Waived* - Reason waived: _____

Conditions and Waiver

Only the physical kit shall be subject to the deposit, and there shall not be a charge for any contents used. Please note that the Survival Backpack's permanent supplies, such as the emergency radio and compass, are considered part of the physical kit and must also be returned. The small and car kits are subject to a \$10 deposit, and all other kits are subject to a \$20 deposit.

The borrower must return the first aid kit, in the same condition as they received it, on or prior to the agreed date of return to retrieve the deposit.

The borrower understands that failure to return a kit by the agreed upon date without contacting the Unified Support Centre to explain the reasons thereof and to arrange an alternate return date is theft of Unified Support Centre property, and may result in a report of theft to Campus Safety Services and/or a suspension of CUSA club funding and support.

The borrower agrees to indemnify, save and hold harmless the Carleton University Students' Association, Carleton University, and the Unified Support Centre staff and volunteers from any and all judicial and extra-judicial fees and disbursements, damages, awards, and settlements which may arise from any of the borrower's acts or omissions as a result of borrowing the first aid kit.

The borrower, _____, hereby confirms their understanding of and agreement to the First Aid Kit Sign Out Form, and has fully read and understood the document. The borrower understands that the Unified Support Centre is not liable or responsible for any injury or harm caused by the improper or negligent use of any first aid equipment. The borrower also agrees to return the first aid kit in the same condition on or before the agreed upon date of return or forfeit their deposit.

Date Requested: _____ Return Date: _____

Student Signature: _____ Date: _____

Staff Signature: _____ Date: _____

* Deposit may only be waived in exceptional circumstances, to be determined by the Foot Patrol Coordinators.

- For Staff Use Only -

Returned On or Before Agreed Date: Yes No - Date Returned: _____

Contents Used:

Deposit Returned: Yes No - If no, reason: _____

Reason First Aid Kit Not Returned: _____

Borrower Paid for Replacement: Yes No

Additional Notes: _____
