

**ShadowChase Running Club**  
**P.O .Box 3605**  
**Modesto Ca. 95352**



## EQUIPMENT RENTAL

Event Name and Event Date \_\_\_\_\_

Club or Organization \_\_\_\_\_

Event info \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

e-mail \_\_\_\_\_

Items needed \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Rental Fee \_\_\_\_\_

Deposit \_\_\_\_\_

Signature \_\_\_\_\_