

323.389.RENT (323.389.736) info@kalliopeaudio.com

5100 Melrose Avenue | Hollywood, CA 90038

Company Name:					
Address					
Address continued		City	State	Zip	
Office Phone	Cell Phone		Fax		
mail					
Oriver's License Number				State	
Equipment Needed					
			I		
Business References					
1) Company Name		Contact	Phone		
(2) Company Name		Contact	Phone	Phone	
Ovadit Card Informat	lion				
Credit Card Information Credit Card Number (VISA / MC / AMEX		Exp. Date	Security Code	Billing Zip Code	
AND A MICLAME	(/ DISCOVER)	enp. eato	South 1 y out	Timing mip vodo	
Name on Card		Business Name (18	Different)		
Taille Oil Cat 4		Manicaa Manik (II	Dilletetit)		
The above listed applicant declares that all overify all of the information listed in this applicat				authorizes Kalliope	

By signing below, as the credit card holder, I hereby authorize Kalliope Audio to charge my credit card for the contracted rental amount upon receipt of merchandise at the shipping address above. The applicant signature also acknowledges that in the event of failure to return rental items undamaged and or within 24 hours of rental end date, Kalliope Audio is authorized to charge the full current retail amount of replacement for damaged equipment. Furthermore applicant authorizes additional day rates to be charged for each 24hr period exceeding original contract dates.

Cinnadanca				
Signature	Date			