



Equipment Hanover Community Access Television

Request Form

www.hanoverctv.org

Name: _____
Home Phone: _____
Pick-up Date/Time _____

Project/Location: _____
Cell Phone: _____
Return Date/Time: _____

Camera Packages

Camera Model: JVC GY-HM100U: _____ JVC Everio: _____ Canon Vixia: _____
Kodak Zi8 Flip: _____ Canon Rebel: _____

Tripod: Manfrotto: _____ Slik: _____

Batteries/Memory cards

Model: _____ Quantity: _____
Memory Cards GB: _____ Quantity: _____
External Battery Charger: _____

Miscellaneous

Light Kit: _____ Green Screen: _____

Microphones

Wireless Lavalieres: _____ Hand-held: _____ Wireless Hand-held: _____

Audio

Mackie Portable Mixer: _____ Headphones: _____
Desktop mic stand: _____ Mic stand: _____

Cables

XLR to XLR: _____ XLR to 1/4": _____ XLR to Mini: _____ 8 Ch. Audio Snake: _____
BNC to BNC: _____ RCA to RCA: _____ Other: _____

Adapters:

XLR to 1/4": _____ XLR to Mini: _____ XLR to RCA: _____
BNC to RCA: _____ Other: _____ Other: _____

The undersigned has checked the equipment and agrees that it is in working order. The undersigned assumes full responsibility for any damage to the equipment while in his/her possession. The undersigned also agrees to reimburse HCTV for loss or damage to such equipment by paying for the full market value replacement cost. Negligent handling of the equipment will result in the forfeiture of future studio/equipment rights

Signature: _____ Date: _____
(must be signed by parent or guardian if volunteer is under 18 years of age)

