**Name:**

**Address:**

**Phone #:**

|  |  |  |
| --- | --- | --- |
| **Rental Date** | **Expected Return Date** | **Actual Return Date** |
|  |  |  |

**Check the number associated with the live trap(s) being rented**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
|  |  |  |  |  |  |  |  |  |  |

* I understand that there is a $100 deposit for the rental of a live trap.
* I understand that I will be charged the $100 deposit if the live trap is not returned within 7 days of the expected return date.
* I will pay a $1.00 a day rental fee for every day I have possession of the trap.
* I will return the trap within 7 days of the rental date or notify Humane Society of West Michigan to extend the rental for additional time.
* I will pay a $2.00 a day late fee from the original expected return date.
* I understand that if the live trap is lost, stolen, not returned or damaged beyond reasonable use, my deposit will be forfeited.

**Deposit Information**

|  |  |
| --- | --- |
| **Card Type (Visa, MC, etc.)** |  |
| **Card Number** |  |
| **Expiration Date** |  |
| **CVV** |  |

Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sign: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:

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