



Equipment Return

FAX: 1-604-485-2759
info@auditoryoutreach.ca

Please include this form when returning equipment.

Reason for Return:

Student moving out of district Student graduated

Student not using equipment Student received a replacement system

Other: _____

Date Submitted: _____

Student NAME: _____

School District #: _____ **School Name:** _____

Contact Person: _____

Phone: _____ **Email:** _____

Equipment Being Returned

<p>Receiver:</p> <p>Model _____ Serial # _____</p> <p>Model _____ Serial # _____</p>	<p>Transmitter:</p> <p>Model: _____</p> <p>Serial: _____</p>
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ACCESSORIES ENCLOSED: *Please return equipment using the case originally provided.*

Audio Shoe(s) eg. AS15 silver - 2 _____ Mic Case Charger Belt Clip USB

Input (Audio) Cord Lanyard Adaptor Other: _____

School District Authorization: _____

Please Print *Signature*

Auditory Outreach supports hundreds of students throughout the province.

We ask for your assistance by returning equipment as soon as possible so we may reassign it.

The return of each accessory enables us to save funds which may be used towards the purchase of new technologies.

We appreciate your efforts to ensure all loaned items are returned.