

Remembrance and Hope Chests

Reservation Request Form 2010-2011

Please read this agreement carefully and either fax it to (913) 327-8193 or mail it to the Midwest Center for Holocaust Education, 5801 West 115th Street, Suite 106, Overland Park, KS 66211. Upon receipt of payment, your reservation will be confirmed by email.

Name _____

School & District _____

Delivery Address _____

Telephone (W) _____ (H) _____ fax _____

Subject Taught _____ Grade level _____ e-mail _____

_____ \$60 fee* is enclosed for a 4-week rental. (Add \$5.19 tax or provide tax-exempt number _____)

_____ \$100 fee* is enclosed for an 8-week rental. (Add \$8.65 tax or provide tax-exempt number _____)

_____ Please invoice:

Name _____ Tel. _____

Address _____

I would like to rent a Remembrance and Hope Chest for the following dates:

Option 1: _____

Option 2: _____

Option 3: _____

** Additional delivery charges will apply for schools outside the 5-county KC metropolitan area.
Our liability policy prohibits school personnel or any other individual to transport the chests.*

IMPORTANT!!!

- Chests are delivered after the start of school on the first day of each loan cycle and must be properly assembled and available for pick up in the school office no later than 7 a.m. on the last day of the cycle.
- MCHE reserves the right to charge a second delivery fee if chests are not ready when the courier service arrives plus an administrative fee of \$10-\$25 for chests that are not returned with materials assembled according to the diagram provided in the teacher notebook. Your cooperation is greatly appreciated.

In requesting the loan of these resource chests, the teacher named above and/or the school or school district agree(s) to the following:

- Chests will be housed in the classroom of the requesting teacher and will remain locked and secured when unsupervised.
- All copyrights will be honored.
- Resource chests will be ready for pick up in tact and on time.

I agree to the conditions stated above and understand that I am financially responsible for replacement of missing or damaged materials from the chest.

Signature _____ Date _____