

**SOLA VIOLINS**  
**INSTRUMENT RENTAL AGREEMENT**

•Renter is responsible for the care of the instrument, bow, and case, and will notify **SOLA VIOLINS** of any damage to the instrument, bow, and/or case. Deposit and any purchase credit is forfeited in the event of total loss of the instrument, bow, or case. Renter is responsible for returning every item included with rental (case blanket, straps, etc.)

•Renter pays a monthly protection fee to cover the repair cost of any accidental damage or malfunction. Renter pays for intentional damage and damage resulting from gross neglect. **SOLA VIOLINS** must perform all repairs.

•**A \$5 LATE FEE WILL BE CHARGED FOR PAYMENTS 15 DAYS PAST DUE.**

Purchase Credit: **100% OF THE FIRST YEAR'S RENTAL PAYMENTS (PLUS DEPOSIT) CAN BE APPLIED TO PURCHASE THE RENTED INSTRUMENT, BOW & CASE OR A SIMILAR INSTRUMENT, BOW & CASE. 20% OF SUCCESSIVE YEARS' PAYMENTS CAN ALSO BE USED AS PURCHASE CREDIT.**

I authorize **SOLA VIOLINS** to charge my credit/debit card for the rental on a monthly basis (either on the 1st or the 15th of the month). **I AM RESPONSIBLE FOR NOTIFYING SOLA VIOLINS OF ANY CHANGES IN PAYMENT METHOD (EXPIRED CARD ETC).** We do not accept gift cards for rental payments.

**I HAVE READ AND AGREE TO THE ABOVE POLICY**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Renter's Name \_\_\_\_\_

Student's Name \_\_\_\_\_ Music Teacher \_\_\_\_\_

Renter's Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email \_\_\_\_\_

Cell phone \_\_\_\_\_ Home/other phone \_\_\_\_\_

**PAYMENT METHOD (CIRCLE ONE)** Credit or Debit

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_ Billing Zip \_\_\_\_\_

**FOR OFFICE USE:**

Size \_\_\_\_\_ Instrument \_\_\_\_\_ Model \_\_\_\_\_ Rental Number \_\_\_\_\_

Bow \_\_\_\_\_ Case \_\_\_\_\_ Serial Number \_\_\_\_\_

•Case straps \_\_\_\_\_ •Case Blanket \_\_\_\_\_ •Rosin \_\_\_\_\_ •Case Tag \_\_\_\_\_

**TOTAL REPLACEMENT VALUE/ PURCHASE PRICE \$** \_\_\_\_\_

**SECURITY DEPOSIT PAID \$** \_\_\_\_\_

**MONTHLY RENTAL PAYMENT \$** \_\_\_\_\_ **ON** \_\_\_\_\_ **DAY OF EACH MONTH**

**PROTECTION FEE \$** \_\_\_\_\_ **MONTHLY** **INVOICE STARTED** \_\_\_\_\_ **CONTRACT EMAILED** \_\_\_\_\_

**PAYMENTS:**

	Year 1	Year 2	Year 3	Year 4
I				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
	Credit: _____ Balance: _____ Gave Notice: _____			

**NOTES:**

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DATE RETURNED: \_\_\_\_\_ CONDITION: \_\_\_\_\_

CURRENT ADDRESS CHECKED: \_\_\_\_\_ DEPOSIT CREDIT DUE: \$ \_\_\_\_\_ INVOICE STOPPED \_\_\_\_\_