

MONTGOMERY COUNTY PUBLIC SCHOOLS**Receipt and Bond for Band/Orchestra Instruments**

Department of Secondary Curriculum and Districtwide Programs
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

Student Name _____ MCPS ID# _____ Grade _____

School _____

Parent Name _____ Phone _____ - _____ - _____

Parent Email _____

Address _____

Instrument Received _____ Date Received ____/____/____

Make/Model _____ Factory Serial No. _____ Value \$ _____

Included Accessories:

Remarks:

I hereby agree to hold myself financially responsible for any damage, except normal wear and tear, which may come to the instrument while it is in my care. I agree that no person other than myself will be allowed to use the instrument and that I will return it to the school when requested by the instrumental music teacher.

Signature, Student _____ Date ____/____/____

Signature, Parent/Guardian _____ Date ____/____/____

Approved

Signature, Instrumental Music Teacher _____ Date ____/____/____

Instrument described above returned in following condition:

Date Returned ____/____/____

School _____

Remarks:

Signature, Instrumental Music Teacher _____ Date ____/____/____