



School Rental Program Parent Application

Agreement #: _____

Date: _____

| | |
|-----------------|---------------------------|
| Signer's Name: | Current Employer: |
| Address: | Work Phone #: |
| | Social Security #: |
| City/State/Zip: | Driver's License #/State: |
| Home Phone #: | Birth Date: |
| Cell Phone #: | E-mail Address: |

| | |
|------------------------|-------------------|
| Spouse's Name: | Current Employer: |
| Spouse's Cell Phone #: | Work Phone #: |

| | |
|-----------------|--------------|
| Student's Name: | School Name: |
|-----------------|--------------|

| Reference 1 – (ADULT Not Living With You) | Reference 2 |
|---|-----------------|
| Name: | Name: |
| Address: | Address: |
| City/State/Zip: | City/State/Zip: |
| Phone: | Phone: |

| Payment Options: | |
|--|--|
| <input type="checkbox"/> I will use my checking/savings account Bank Name: _____ Routing Number: _____ Account Number: _____ Name on Account: _____ *PLEASE ATTACH A VOIDED CHECK* | <input type="checkbox"/> I will use my debit/credit card Account Number: _____ Exp. Date: _____ V-Code: _____ Name on Card (print): _____ |

Special Comments:

I will notify Dietze Music in writing if this information changes, including any bank or credit card changes.

| | |
|------------------|-------------|
| Signature: _____ | Date: _____ |
|------------------|-------------|

FOR OFFICE USE ONLY

| Accessory Checklist | | | |
|---------------------------------------|--|---|--|
| <input type="checkbox"/> music stand | <input type="checkbox"/> strings | Rental (Pre-Tax) | |
| <input type="checkbox"/> care kit | <input type="checkbox"/> shoulder rest | Book | |
| <input type="checkbox"/> reeds | <input type="checkbox"/> polish cloth | Accessories | |
| <input type="checkbox"/> reed guard | <input type="checkbox"/> rock stop | Peace of Mind Protection | |
| <input type="checkbox"/> slide grease | <input type="checkbox"/> | SUBTOTAL | |
| <input type="checkbox"/> | <input type="checkbox"/> | Tax | |
| <input type="checkbox"/> | <input type="checkbox"/> | Additional Charges (i.e. SP20) | |
| <input type="checkbox"/> | <input type="checkbox"/> | Total | |
| Special Notes: | | | |
| | | <input type="checkbox"/> check <input type="checkbox"/> cash <input type="checkbox"/> credit card | |

Dietze Representative: _____
 (Name and Employee #)