Stewardship Through Education, LLC

Lending Library Contract

Kit Name	
Check-Out Date	
Return Date	
School or Location	
STE Contact Person	
Check-Out: have pre-checked this kit prior to check-out and find all the materials present that are on the accompanying inventory sheet. I take full responsibility for the contents of this kit. If there are any items not returned I will be held personally responsible for the replacement of that item (not including consumables).	
Name	
Contact Number	
Signature	Date
Check-In: I have checked the kit against the inventory sheet. All items present	
□ Missing	
☐ Consumables Used	
Sianature	Date