

This agreement is made between _

info@ckviolins.com • www.ckviolins.com

SCHEDULE OF FEES

Instrument	Monthly Rental	Refundable Deposit
Violin	\$20	\$100
Viola	\$25	\$100
Cello	\$50	\$300

_ and CK Violins LLC.

Rental Agreement

0	Viola □ Cello 1/4 □ 1/2 □ 3/4 □ 4/4 um of three (3) months.		
I understand that payments are due on the first day of each month and agree to submit my payment on or before the first of each month (check to be made payable to CK Violins).			
I also agree to provide a refundable deposit of \$ to cover the cost or partial cost of repairs or replacement due to misuse, neglect or accidental damage. I further agree to return the instrument, bow and case in the same condition that it was received and agree to pay for all repairs or replacement costs beyond the amount of the deposit. All damages and repair costs will be determined solely by CK Violins.			
Additional Conditions / Notes:			
Rental Agreement Number:			
Signature:	Date:		
Mailing Address:			
City: State	Zip		
Home Phone:	Cell Phone:		
Email Address:			
CREDIT CARD #1	CREDIT CARD #2		
Name on Card	Name on Card		
Billing Address	Billing Address		
City/State Zip	City/State Zip		
Phone #	Phone #		
Type	Type □ Visa □ MC □ JTB □ AmEx □ Disc		
Card #	Card #		
Exp. Date Validation	Exp. Date Validation		
I hereby authorize CK Violins to charge the monthly rental fee stated above to my credit card for as long as I remain in possession of the instrument that I have secured. I also agree to provide CK Violins with my current card information throughout the term of my rental.			
Signature Date	Signature Date		