



4040 East Post Road, Bldg F-6, Las Vegas, Nevada 89120
Phone (702) 736-8934

www.desertstrings.us; info@desertstrings.us

Name of Renter _____ Name of Player _____
Street _____ Apt # _____
City _____ State _____ Zip _____
Main Phone (____) _____) _____ E mail _____
Employment _____ Work Phone _____
School _____ Teacher _____
Driver's License #: _____ How did you hear about us? _____
Picked up in person / Deliver to: _____
(Circle one)

*** Two major Credit Cards are required with ALL rentals***

Credit card 1 #: _____ Exp. _____ Zip code: _____
Name on card: _____ Security Code _____
Credit card 2# _____ Exp. _____ Zip code: _____
Name on card: _____ Security Code _____

Note: If the first credit card does not go through, we reserve the right to charge the second credit card on file. Initial _____

Please circle your preferred billing plan:
Monthly plan

_____ **Yes, I authorize Desert Strings to charge my rental fees with AUTOMATIC CHARGE.**

Please charge my credit card listed above on the 5th of every quarter period of the month. However, I reserve the right to come in or send in payment prior to due date. I understand that my card will be charge for rent and late fees if my balance is not paid in full by the 15th of that due month. **Billing Date: January 5th, April 5th, July 5th, October 5th.**

Annual discount plan

_____ **Yes, I authorize Desert Strings to charge my rental fees with AUTOMATIC CHARGE ANNUALLY** on the 5th of the month. However, I reserve the right to come in or send in payment prior to due date. I understand that my card will be charge for rent and late fees if my balance is not paid in full by the 15th of that due month.

These items can be delivered with your instrument at additional cost. Please circle number to indicate:

- 1) K&M Folding Music Stand.....\$24.99
- 2) Korg TM-50 Digital Tuner/Metronome.....\$33.45
- 3) FOM Shoulder Rest for violin/viola.....Violin: \$22.00 Viola: \$25.00

Instrument: _____ Size: _____ Value _____
Instrument: _____ Size: _____ Value _____
Instrument: _____ Size: _____ Value _____

Annual/ Monthly rent (if other than Caprice): _____ Insurance: _____ Deposit: _____

PLEASE READ THE TERMS ON THE REVERSE SIDE OF THIS FORM. By signing you affirm that you have read and understand all terms printed on both sides of the agreement.

SIGNATURE OF RENTER _____ **DATE** _____