



Adirondack Chair Rental Request Form

When to Book

You may reserve chairs **up to 2 months** in advance of your desired use date. We cannot accommodate bookings less than one week prior to a desired date.

How to Book

Complete this request form and submit by email to jhockett@jordanhockett.com or by mail to PO Box 3000, Paso Robles, CA 93447.

Payment

Payment in full is required to reserve chairs.

Cancellation Policy

Cancellations made more than 30 days before the pick-up date will receive a refund less a \$10 cancellation fee.

A refund of \$50 will be given when a cancellation request is received less than 30 days prior to the scheduled rental date.

Questions?

Email Jordan Hockett at jhockett@jordanhockett.com or call 805.296.0871

Chair Rental Agreement

1. Payment in Full is requested at the time of reservation but required by pick-up. No refunds are issued.
2. It is your responsibility to arrange transportation of the chairs during your rental period.
3. All equipment is to be returned in excellent condition. In case of loss or damage, the renter agrees to pay Studios on the Park for full current replacement costs.
4. NO LOANING OR SUB-RENTING OF ANY PART OF THE CHAIRS IS PERMITTED AT ANY TIME, FOR ANY REASON.
5. You are responsible for the replacement cost of chairs rented if they are lost or stolen, AND you are responsible for any repair or damages that are not the result of normal wear and tear.
6. I further agree to hold harmless and indemnify Studios on the Park, its officials, officers, directors, agents, employees and volunteers from any liability for personal injury, death, property damage, caused, directly or indirectly, by use or misuse of the chairs.

Agreed & Accepted by Renter _____ **Date** _____

FOR STUDIOS USE ONLY:

Date Received: _____ **Rental Booked:** _____ **Payment Processed:** _____ **Confirmation sent:** _____

Renter Information:

Name: _____
Address: _____
City/State/Zip: _____
Phone Number: _____
Email: _____

Rental Information:

Date: _____
Location: _____

Pick-Up & Return:

Available seven days a week between 9 am and 4:30 pm

Pick-Up Date & Time: _____

Return Date & Time: _____

Payment Information:

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Chair Fee: \$70 for ten chairs plus \$6 per additional chair

Optional Requests

____ Delivery (if possible) \$50 minimum one way

Check for \$_____ payable to Studios on the Park (must submit with completed form)

Please charge my credit card \$_____ **Visa/Mastercard** (circle one)

Card Number -----

Expiration Month/Year: ____ / ____

Name on the card: _____

Signature: _____