



# Equipment Request Form

**Equipment:**

Item	Qty.	Cost per day	Qty. Requested
1 Speaker Sound System w/ wireless microphone	2	\$75	
2 Speaker Sound System w/ 2 wireless microphones	1	\$125	
300 seat bleacher (45'x18'x11.2')	3	\$250	
375' metal barricade fencing (7'.5" each)	50	\$200 or \$5 each	
Generator (8000W)	1	\$90	

**Transportation Fees:**

## 1. Bleacher transportation fees\*:

\$100 for the first hour + \$20 for each additional 15 minutes

\$2/mile (factor in return trip too)

(\*unless you have the ability to transport the bleachers with an F-250 type truck and military pintle hitch)

Example: 1 bleacher from Rockford to DeVos Place Convention Center is 26 miles (13 miles for delivery vehicle to go one direction, so 26 total for the delivery truck to go back to Rockford that same day). It should take about an hour, so you would pay \$100 + 26 mi x \$2 = \$152 one way. You will also be responsible for this fee when they have to pick up the bleacher after the event.

## 2. Transportation Fees for Items OTHER THAN BLEACHERS:

Items requiring delivery will be charged \$25, which includes 45 miles round trip drive. Additional mileage \$.60/mile. (note that most equipment is stored at the Art Van Sports Complex in Rockford on 10 Mile Rd.)

**Payment & Insurance:**

- You will be required to pay for rental prior to the event (see form below) and invoiced for delivery post event.
- Certificate of insurance listing the 'West Michigan Sports Commission' as a Loss Payee must be submitted prior to the event

Your Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Event Name: \_\_\_\_\_

Event Date: \_\_\_\_\_ Describe Event: \_\_\_\_\_

Event Address: \_\_\_\_\_

Set Up Date & Time \_\_\_\_\_ Tear Down Date & Time \_\_\_\_\_

(be specific if you are renting the bleachers)

Check one of the following: \_\_\_\_\_ I need equipment delivered \_\_\_\_\_ I am able to pick up/drop off equipment

Payment:

Payment Type: Check \_\_\_\_\_ Credit Card \_\_\_\_\_ (You may call 616.608.1836 to pay over the phone)

Credit Card Number: \_\_\_\_\_ Exp: \_\_\_\_\_ CSV: \_\_\_\_\_

Address for Credit Card: \_\_\_\_\_

I agree to provide the certificate of insurance form, payment of the equipment rental and delivery fees, and to the 'you break it you replace it' with exact or better item.

Signed: \_\_\_\_\_ Printed: \_\_\_\_\_

Date: \_\_\_\_\_

*Checks and certificates of insurance must list 171 Monroe Ave NW, Ste 545 Grand Rapids, MI 49503 as the address.  
Emailed insurance certificates are accepted to ktigchelaar@westmisports.com*