



Equipment Request Form

Equipment:

Item	Qty.	Cost per day	Qty. Requested
1 Speaker Sound System w/ wireless microphone	2	\$125	
2 Speaker Sound System w/ 2 wireless microphones	1	\$200	
300 seat bleacher (45'x18'x11.2')	2	\$500	
300 seat bleacher w/ shade (45'x18'x11.2')	1	\$600	
375' metal barricade fencing (7'.5" each)	50	\$500	

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 must 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 MUST list the Renter of Leased Equipment (bleachers) in the "Insured" box on the certificate.
- General Liability Limits no less than 1million occurrence/2million aggregate must be demonstrated.
- Leased/Rented Equipment Coverage must be demonstrated with a limit that WMSC staff gives you based on the equipment you're renting.
- West Michigan Sports Commission shall be listed as Loss Payee in respect to Leased/Rented Equipment on the certificate in the "Description of Operations" box.
- The following language shall also be included in the "Description of Operations" box: West Michigan Sports Commission is included as an additional insured in respect to the general liability policy on a primary and non-contributory basis. A waiver of subrogation is included in favor of West Michigan Sports Commission.

Your Name: _____ Phone: _____

Email: _____

Billing Address: _____

Event Name: _____

Event Date: _____ Describe Event: _____

Event Address: _____

Equipment Pick Up Date & Time _____ Equipment Return Date & Time _____

(Must be on a weekday, to prevent Art Van Sports Complex event interruption, unless given other approval)

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*