



SCHOOL OF ART AND DESIGN
PHOTOGRAPHY
STUDIO USE AND RENTAL AGREEMENT

I, _____, acknowledge and agree that I am solely responsible for the care, custody, and control of the Sabinal Photography Studio and all studio equipment that is checked out to me throughout the _____ semester of year _____. I understand that the studio equipment provided to me is only to be used in the Studio during the time that I am scheduled for. I agree to return the Studio space and the studio equipment in the same condition as I received it to the Texas State School of Art and Design at the end of my studio session. I understand that the equipment must always remain in the studio and must not leave.

During use, I understand that I may use the Sabinal Photography Studio and studio equipment only for educational purposes in connection with my Art and Design courses at Texas State University. I will not use the Studio and studio equipment for purposes unrelated to my educational courses at Texas State University or for any illegal purpose. I will not alter, disassemble, nor make any modifications to the Studio and studio equipment that I am responsible for.

I agree to promptly pay for any damages to the equipment that occurs from any cause during the use and while the equipment is otherwise within my care, custody, or control. If the equipment is lost or stolen while it is checked out to me, I will promptly pay the amount Texas State University requires to replace the equipment.

I further agree that until the damaged or lost equipment is paid for or replaced with an item of equal value, Texas State University may withhold privileges and place a hold on my records. The hold will prevent me from receiving my semester grades, from receiving an official transcript, and from registering for classes at Texas State University.

I understand that **any** incidence of failure to report issues or damage to the Studio and/or studio equipment may cancel my privileges to access the Studio for the remainder of the semester.

I AGREE TO THE LOAN TERMS AND CONDITIONS STATED ABOVE.

Name _____ NetID (TX State Email) _____

Phone# _____

Semester / Professor _____

Signature _____ Date _____