



MEDICAL EQUIPMENT LOAN, RENTAL & LIABILITY RELEASE AGREEMENT

Type of equipment: _____

Equipment request date: month _____ day _____ year _____

2158 Mount Newton X Rd, Saanichton BC V8M 2B2 Ph: 250-652-2112 Fax: 250-652-7732

User of equipment information:

Last: _____ First: _____

Street address: _____

City/town: _____ Postal Code: _____

Phone: _____ Birth Year: _____

Local contact (person responsible, other than above, to return equipment):

Last: _____ First: _____

Email: _____

Address: _____

City/town: _____ Postal Code: _____

Phone: _____ Relationship to user: _____

PLEASE READ CAREFULLY BEFORE SIGNING

I understand:

- this service is operated by an independent non-profit organization, the Mount Newton Centre Society;
- the Mount Newton Centre (MNC) Medical Equipment Loan Service does not receive any Government funding;
- the area served is the Saanich Peninsula from Royal Oak Drive North to Swartz Bay, bordered by West Saanich Road, Wallace Drive and Benvenuto to Tod Inlet;
- that MNC equipment is not intended for use in Care Facilities, Group Homes, Acute Care or Extended Care Hospitals;
- the majority of items are initially on loan on a "Donation Basis" unless otherwise stipulated at the time of sign-out;
- that donations contributed by Users and Families will enhance and sustain this Service;
- all donations are welcome and donors are issued a Tax Receipt under Charitable Organization #10772 7281 RR 0001;
- I will receive information on the Centre's activities, including those pertaining to fund-raising;
- all signed-for equipment under the User's and /or Designate's signature is accepted for the User's personal use only;
- the use of any or all Mount Newton Centre equipment is the User's responsibility;
- instruction on the proper use and installation of medical Equipment & Mobility Aids must be obtained from a Health Professional independent of MNC Staff;
- "User Specific" items (i.e. 4 wheeled walkers) MUST BE ORDERED FOR THE USER BY A PHYSIO/OCCUPATIONAL THERAPIST, WITH INSTRUCTION PROVIDED BY THE THERAPIST PRIOR TO USE;
- all equipment must be returned clean and in good condition;
- any MNC equipment requiring repair must be immediately reported to the Centre by phoning 250-652-2112; and
- all Centre equipment must be serviced and repaired only by MNC or authorities designated by them.
- that MNC equipment is expected to be returned on or before the DUE DATE shown at the time each item is signed out
- if equipment is not returned by the DUE DATE, an invoice will be generated for advance rental and at regular intervals thereafter;
- in stipulated cases, invoices will be issued and payable on receipt. The Society reserves the right to alter the fee scale;
- that the Delivery, Set-up, Dismantling and Pick-up of large equipment such as hospital beds and lift chairs, is solely the responsibility of MNC Staff;
- a minimum of 48 hours notice must be given for the transporting of large medical equipment;
- large equipment is only delivered Monday to Friday, with Delivery Charges to be paid at time of delivery.
- that upon written notification to the user, the Centre may increase rental and/or delivery fees.
- as all charges for equipment are nominal, there will be no pro-rated refunds upon return of equipment; and
- that I will be responsible for replacement at full retail value, for any equipment signed for under this Agreement that is not returned to Mount Newton Centre.

I, the undersigned User or Person Responsible for the equipment have read, understood, and concur with this Agreement.

User Name: _____ Signature: _____ Date _____

Person Responsible: _____ Signature: _____ Date _____