SPRING 2015 SRC TEXTBOOK
RENTAL PROGRAM

To enroll in the Spring 2015 AS Textbook loan Program, students must sign this agreement and bring their Class Schedule to the Bookstore Text Counter. Student may pick up their books after 48 hours. Rentals have to be approved textbook titles.

TERMS OF AGREEMENT
By signing this form, you agree to the following terms and conditions

1. I understand and accept the responsibility that at the end of the current term, SPRING 2015, it is my responsibility to return the books by MAY 21ST at 12:00 with NO EXCEPTIONS.

2. If books are not returned by the due date, I understand I will not be eligible for the rental program in Fall 2015. I understand that a hold will be placed on my record and will not be removed until I pay for the books. I understand that I am responsible to pay the retail price for the textbooks directly to the SBVC Bookstore.

3. I understand that the book rented to me is the property of SBVC bookstore. I accept the responsibility to use the book and return it to the SBVC Bookstore in resalable condition. If the book is returned damaged (i.e. water, excessive highlighting, ripped pages, bent corners, etc), I am responsible to pay the retail price directly to the ASG General Fund Account.

4. I understand that only REQUIRED textbooks are eligible to rent, not optional books. If I want to have an optional textbook, I must pay for it myself.

5. I have read and fully understand the provisions and the terms of this agreement as outlined and I agree to adhere to all conditions and terms stated.

For Student to Complete:

Name (Please Print) ___________________________ Student Signature ___________________________ Date ___________________________

For Store Use Only

Student ID # ___________________________ Student Phone # ___________________________ Staff Initials ___________________________ Returned ___________________________

ISBN# ___________________________
Student Information

Student First Name:_________________________________________________________

Student Last Name:_________________________________________________________

Student Phone Number:_____________________________________________________

Student Email Address:_____________________________________________________

Student ID#:____________________________________________________________

Title of Book:_____________________________________________________________

Book Edition/Year:_________________________________________________________

Author of Book:____________________________________________________________

Is this the first time using the Book Rental Program?:___________________________

Please circle any programs below which you are a member of:

STAR
EOP&S
FINANCIAL AID
DSP&S
CALWORKS
VALLEYBOUND
CARE

You will be notified within a 48 hours period to pick up your books from the bookstore. Please keep checking your student email for available pick up times for your books. Thank you.

Please Attach A Copy of Your Registration Statement To This Application.