

Student Authorization Form

Date: _____
Semester: _____

DeHaven Camera Corp
5162 West Jefferson Blvd.
Los Angeles, CA 90016

Dear Rentals Department:

Thank you for your willingness to work with our film students. This letter authorizes the following student production to use our insurance, which you have on file.

Film Title: _____

Production Number: _____

Rental Time Period: _____

Authorized Students: _____

Student Contact Phone: _____

Student Contact Email: _____

Student Contact Address: _____

School Name: _____

School Address: _____

Program Contact Name: _____

Contact Phone: _____

RENTAL ITEMS & REPLACEMENT VALUE

Are you listing rental items on a separate attached quote? _____

Total replacement value of all rental items: \$ _____

The crew listed above is approved for the specified production and time period. This letter acknowledges that the (School Name) _____ will accept responsibility for the loss and damage to the above rental (or items listed on an approved addendum page) as used by this crew for this time period, should it occur. (School Name) _____ shall also provide \$2 million general liability coverage for this production under the terms of the blanket insurance policy we have in effect with your organization. Please feel free to contact us (contact number) _____ with any questions of concerns, or if you wish to verify the above information.

SIGNED:

Print Name: _____

Position: _____

This form must be stamped with a school seal OR must be returned via email from the program contacts email address with the student CC'd to rentals@dehavencamera.com please reference the Job or quote # in the email subject

Stamp or Seal: