LAFAYETTE COLLEGE OFFICE OF RESIDENCE LIFE COMMUNITY STORAGE AGREEMENT

Please print legibly						
Name:		Class Year:	Today's Date:			
Email Address:		Cell Phone Number:				
	<u>c</u>	Check All That Apply				
I am studying abroad for the semester (Items should be stored in the Ramer basement closet).						
I expect to be an Early 1 week before start of fall cla		tems in main closets and house	storage areas will not be accessible until approx.			
I am storing for the Fal	<u>l</u> 20 semester					
I am storing for the Spring 20 semester						
			een Residence Hall closing in May and a week no expectation of access during this time.)			
own risk. Lafayette College as Students are prohibited from st	ssumes no responsibilition in the following iter nicals, food, bicycles, o	ity for loss, theft, or damage ms: furniture (including futons r any item prohibited in the ho	rge. Students who store items do so at their of property stored in its residence halls. (a), loft or building materials of any kind, busing contract. Further, students are required			
Section 1.01 Type of Item (i.e. box, bag, TV, refrigerator, storage bin, etc)	(a) Quantity		Box, Bag, Storage Container, etc individuals to reveal the contents of items stored)			
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I understand that	I am placing my per	rsonal belongings in a community storage area that at times
may be unsecured. I furth	ner understand that	Lafayette College assumes <u>NO</u> responsibility for loss, theft or
damage to any items I pla	ace in storage. The	College reserves the right to rearrange any items in storage
and to discard any unapp	proved items. Items	still in our storage after the date they were to be collected are
subject to being discarded	d. Unlabeled or ab	andoned items <u>WILL</u> be discarded.

By signing below, I acknowledge that I am responsible for adhering to the policies and procedures established by the Office of Residence Life (this info found at https://reslife.lafayette.edu/storage/).

I am also acknowledging that I will be granted access to retrieve my belongings <u>ONLY</u> during scheduled pick up times that are established by the Office of Residence Life.

Student Signa	iture:		Date:		
Est. Date of P	ick Up:	Total # of It	tems Stored:		
Residence Life Staff use only	Building		(Circle one) All items labeled? Y N		
Date In:			with schedule of Y N		