MICROFRIDGE LEASE AGREEMENT

(Please Print All Entries)
Date ________________________________

I, _______________________________________________________________ the undersigned student (hereinafter “Lessee”) agree to lease one refrigerator/microwave combination unit (hereinafter “Micro Fridge” from Muskingum College (hereinafter “Lessor”) to be used in _________________ Hall, Room # ________________, according to the following terms:

1. Upon signing this agreement I shall pay the rental fee of two hundred dollars ($200.00) for the rental period inclusive of the Fall 2005 and Spring 2006 semesters (actual timeframe for this rate is one week after school opens and one week before school closes).

2. I will be responsible for damage to the MicroFridge other than normal wear and tear. Normal wear and tear does not include dents, gouges, scratches, or punctures to the exterior of the unit or breakage of any part of the unit. The liability shall be limited to actual costs to repair or restore the unit to the condition it was in at the beginning of this lease.

3. I will report any damage or malfunction immediately to the Student Life Office (x8080). The college will provide full maintenance for the MicroFridge in the event of malfunction due to a defect in material or workmanship, but does not insure the contents of the unit.

4. I will be liable for the unit if it is lost or stolen. The lessor does not provide insurance coverage for the unit. Replacement cost will not exceed $650.00, for an entire unit, $300.00 for the microwave.

5. I will be responsible for the MicroFridge’s general upkeep as outlined in the instructions on the unit. I will not disassemble the unit.

6. I will use the MicroFridge at my college residence and will not remove it except to return it to the lessor.

7. At the termination of this lease, I agree to return the MicroFridge with all equipment intact.

8. The lessor grants permission for the transfer of this lease if the proper paperwork is completed and the new lessee meets the student status and any other identified expectations through the Student Life Office.

9. I understand that this is a lease agreement only, without an option to buy.

________________________________________  __________________________________________
Lessee’s (Student’s) Signature                  Lessor’s (Staff’s) Signature

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<td>Payment Processed/Received by: _______________________________ Date: ________________</td>
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<td>Staff Review: ___________________________________ Date: ________________</td>
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