



## Fiesta Friends Item Request Form

Name: \_\_\_\_\_ Child's Name: \_\_\_\_\_

Child's Age: \_\_\_\_\_ Phone number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Street Address: \_\_\_\_\_ Apt. #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

I am interested in borrowing the following item(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Disclaimer: I understand that I will be asked to provide a \$5.00 deposit or credit card number that will be returned to me upon return of the items borrowed from the Fiesta Friends, Inc. Lending Library. I am responsible care of the item(s) borrowed and will return it in the same condition in which I borrowed it.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Items may be lent for 2-4 weeks based on Therapist/Staff recommendations and the child's needs or situation.*

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For Office Use:

Date Borrowed: \_\_\_\_\_

Date Due: \_\_\_\_\_

Date Returned: \_\_\_\_\_

Deposit Paid/Credit Card Number: \_\_\_\_\_

Therapist/Admin. Signature: \_\_\_\_\_

