

**MEMORY BOXES LOAN AGREEMENT**

**REMOVER**

NAME & POSITION: \_\_\_\_\_

NAME OF INSTITUTION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

POSTCODE: \_\_\_\_\_ TEL NO: \_\_\_\_\_

Proof of identity shown:

Boxes loaned are the responsibility of the named individual, rather than the Institution or Home.

The remover has undergone training and will deliver sessions in line with RCM's best practice guidelines regarding object handling (overleaf) and working with older people (listening skills).

**BOX(ES) LOANED**

Beside The Seaside	Childhood (2 boxes)	Entertainment	Health
Home Cooking	Home Sweet Home	Looking Good 1	Looking Good 2
	School Days	The Great Outdoors	Work (2 boxes)
			Make Do & Mend

**PULLEY TROLLEY LOANED** Yes/ No

DATE TAKEN: \_\_\_\_\_ AGREED RETURN DATE (and time): \_\_\_\_\_

**CHARGES**

1 week: £10                                      3 weeks: £20                                      4 weeks: £25                                      (please circle)

Late drop-off will incur a charge of £10 per week after agreed return date

£20 will be payable per item lost or damaged (please *do not* attempt repairs!).

The remover must insure the boxes and their contents once they have left the museum. Non-return of boxes will incur a charge of £500 per box (automatically invoiced one month after return date if no return).

Remover will clarify to staff and participants at institutions where they deliver sessions that the boxes have been provided by the charity RCM and will distribute *Support The Museum* leaflet to staff.

An evaluation form (attached) will be completed for each session and returned with the boxes.

**MUSEUM:** I agree that the information on this form is correct                                      Signed: \_\_\_\_\_

**REMOVER:** I have read and understand the above conditions of loans                                      Signed: \_\_\_\_\_

**RETURN**

**REMOVER:** Checked box items against the CONTENTS CHECKLIST                                        
 Signed: \_\_\_\_\_

**MUSEUM:** Received the item(s) described above, in satisfactory condition                                        
 Received completed EVALUATION FORM                                     

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

An invoice will now be dispatched