

RADAR Audio-Visual Resources
Loan Agreement for use of the Fatal Vision Goggles

KANSAS RESIDENTS may borrow the Fatal Vision Goggles, a set of 3 goggles (2 goggle per set) from the Kansas RADAR (Regional Alcohol and Drug Awareness Resource) Network Center without cost. Loan Privileges are issued to individuals, families, schools, law enforcement and community groups. Anyone wanting to check out Fatal Vision Goggles must have a current **RADAR Loan Agreement Form on file with RADAR**. If not, one can be requested prior to borrowing the Fatal Vision Goggles.

The GOGGLES will be checked out for one week the due date will be listed on the User's Response Card that is enclosed with the Goggles. You may renew for an additional week if there is not a waiting list. Please give a minimum of two weeks notice prior to borrowing the Goggles.

BORROWERS checking out the Goggles are responsible for their safe return to RADAR. For your Protection you can hand –deliver, return by UPS, FEDEX, and or Certified/Registered Mail. **Goggles must be insured for \$900. Mailing fees will vary anywhere from \$7-\$10 to return the Goggles. IF DAMAGED THE BORROWER IS RESPONSIBLE FOR REPLACEMENT. THE CURRENT REPLACEMENT COST: \$300 PER SET.**

After reading the above information, I UNDERSTAND I AM RESPONSIBLE FOR THE FATAL VISION GOGGLES. I agree to pay the replacement cost for the Fatal Vision Goggles if they are lost, stole or damaged. Please sign the Fatal Vision Goggles Loan Agreement and return to RADAR, Kansas Family Partnership, 5942 SW 29th St., Ste. D, Topeka, KS 66614 or Fax form to 1.785.266.6149. Please call 785.266.6161 or 1.800.206.7231 and ask for RADAR to reserve Goggles.

Signature

Date

Borrower Information
(PLEASE TYPE OR PRINT)

NAME: _____

AGENCY/PROGRAM/SCHOOL: _____

ADDRESS: _____

PHONE (DAY): _____ **PHONE (EVENING):** _____

FAX: _____ **EMAIL:** _____

DATE GOGGLES NEEDED: _____ **2ND CHOICE:** _____

NAME OF EVENT: _____ **TYPE OF EVENT:** SCHOOL BUSINESS

COMMUNITY; OTHER: _____

AUDIENCE: YOUTH ADULTS BOTH; **NUMBER OF PARTICIPANTS:** _____ (ESTIMATE)