The Winnebago County 4-H Cash Register System (I-Pad/Square/Hot Spot) is available to check out by certified 4-H leaders to be used at fundraising events (leaders must be trained on the cash register/square system PRIOR to checking it out). The person who checks out the cash register system will be held responsible for its safe use and return by agreeing to the statements listed below.

**Contact Information:**

|  |  |  |
| --- | --- | --- |
| Name: | Pick-up Date: | Phone: |
| Date Trained on  Cash Register System: | Email: | |
| Brief description of activity where cash register will be used: | | |

**PLEASE READ and INITIAL:**

|  |  |
| --- | --- |
|  | I will provide a deposit of $100 at time of checkout |
|  | I have contacted the Leader in charge of the Square Account to reserve use of account and to set up the event (including menu and pricing) in the square system. |
|  | I agree to pick up the cash register system on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. |
|  | I have completed the inventory list with Extension Staff on the back of this form, verifying all equipment I have checked out. *(Inventory will be completed again upon return)* |
|  | I understand that I am responsible for the cash register system, its travel, safe use, and return. |
|  | I agree to keep the cash register system locked up if I have it checked out overnight. Please keep equipment out of extreme heat or extreme cold. Bring inside a building or home when possible. |
|  | I agree to return the cash register system by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. |
|  | If equipment is lost, damaged, or not returned, I understand I am responsible for actual cost of replacement or repair\* *Replacement costs are listed on the back* |
|  | I agree to use the hot spot only for Square transaction data and not personal Internet use. Excessive data usage may result in extra charges that I am responsible for\*. |
|  | **\*** *Leaders may pass additional charges on to their group/fundraiser if appropriate, however it is still the responsibility of the Leader who checked out the equipment to collect money from their group. Contact the 4-H Program Coordinator with questions/concerns.* |

**I have read and fully understand the Cash Register System Check-Out Agreement Form.**

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

**Deposit** Make checks payable to: **Winnebago County 4-H Leaders’ Association**. *Deposits will be held at the Extension Office and returned following inventory of parts and inspection of condition.*

**Office Use Only**

$100 Deposit Check #: \_\_\_\_\_\_\_\_\_\_ or Cash \_\_\_\_\_\_

Date & Time Signed Out: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Staff Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date & Time Signed In: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Staff Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Condition of cash register system upon return: Excellent Good Damage/Missing Items

***Please describe any concerns with condition on back of form***

Amount of deposit returned: $\_\_\_\_\_\_\_\_\_\_

**Equipment Inventory & Replacement Costs  
(Complete at Check-out and Check-in)**

The following equipment is a part of the Winnebago County 4-H Cash Register System. The equipment is held in two separate boxes. Not all equipment out of each box may be used during an event but should be kept together at all times.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Box 1 – Large Box** | | | | |
| **Checked Out** | **Description** | **Checked In** | **Condition** | **Estimated Replacement Cost** |
|  | Old iPad and Stand and cables |  |  | $250 |
|  | Receipt Printer and cables |  |  | $350 |
|  | Cash Drawer and cables |  |  | $250 |
|  | US Cellular Hot Spot and power adapter |  |  | $100 |
|  | IOGear Network Adapter |  |  | $50 |
|  | Square magnetic stripe reader |  |  | $25 |
|  | Extra tape rolls for printer |  | Please list number remaining: \_\_\_\_\_\_\_\_\_\_  **Notify Leader in charge of Square system when less than 2 rolls of receipt tape remain** | $15 for 10 rolls |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Box 2 – Smaller Box – New iPad Stand/System** | | | | |
| **Checked Out** | **Description** | **Checked In** | **Condition** | **Estimated Replacement Cost** |
|  | iPad and iPad accessories |  |  | $350 |
|  | Square Stand |  |  | $200 |
|  | Square stand accessories |  |  | $40 |
|  | Square chip reader and dock |  |  | $100 |