



KRAV MAGA NEW YORK

FITNESS AND SELF DEFENSE FOR EVERYDAY PEOPLE

2 SCOTT DRIVE | SOMERS, NY 10589 | (877) KRAV-MAGA | WWW.KMNY.US

Equipment Checkout Card

Date _____

Name _____

Cell Number _____

Equipment _____

Acknowledgement

I understand that by checking out the equipment listed above, I'm taking full responsibility for its use and care. I understand that I need to return the equipment when asked, and in the same condition I received it. I fully understand and agree that if I do not return the equipment within 3 days, my account will be charged full value for its replacement.

Signature