



Australian Rat Fanciers Society Inc.

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Rescue Service: 0414 864 278

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NEBULISER KIT HIRE AGREEMENT

THE PERSON HIRING THE NEBULISER KIT

AusRFS Member Yes / No

Name _____

Address _____

Phone Number Home _____ Mobile _____

Email Address _____

- I agree to pay the hire cost of \$10 per week.
- I agree to pay the deposit of \$50 for AusRFS members or \$100 for non-members.
- I have a copy of the AusRFS document "Nebulising Treatment for Respiratory Problems in Rats"
- I agree to take good care of the nebuliser machine and accessories and to clean and maintain the equipment in strict accordance with the instructions in the above document. I understand that failure to do so may put at risk, the health of my rats and any rat subsequently being treated with the equipment.
- I agree to return the Nebuliser machine and all equipment to the AusRFS representative in the condition that it was taken, on the date arranged.
- I agree that if the equipment is not returned in the condition it was taken, then the amount required to reinstate the equipment to the required condition will be deducted from my deposit, up to the total amount.

Signature _____ Date _____

THE AUSRFS REPRESENTATIVE

Name _____ Phone number _____

Nebulizer kit number _____ Additional Equipment/Box size _____

- I am confident that the hirer knows how to use the equipment, and understands that it is vital that it is cleaned and maintained in strict accordance with the instructions in the AusRFS advice document.
- I have checked the kit and it is clean and in full working order.
- The following amounts collected on behalf of the AusRFS.

Deposit \$ _____

Hire \$ _____

Total \$ _____ (paid on pick up)

Signature _____ Date _____

TO BE COMPLETED ON RETURN OF NEBULISER KIT

The nebuliser kit has been returned to the AusRFS representative in the condition that it was taken.

Date returned _____ Number of weeks of hire _____

Additional hire fee of \$ _____ has been paid

The deposit of \$ _____ has been refunded.

Hirer's signature _____ Date _____

AusRFS Representative's signature _____ Date _____

A copy of this agreement is to be retained by the Hirer and the AusRFS representative.