

## **Rental Agreement**

**By this agreement** the owner lets and the borrower takes the equipment on hire in accordance with the attached terms and conditions.

Hirer Details	
Name	
Address	
Contact Number	
Proof of address (Utility Bill or Bank Statement no older than 3 months old)	
Photo ID (Passport or Driving Licence)	
Proof of eligibility (PIP/Motability letter or signed letter from a Medical Professional)	
Registered Hiccups family date	
Hire Period (not longer than 21 days)	
Start date	
Finish date	
Agreed Return Time	



Travel Bed	
Voyager Compact	
Safe and Sound Travel Pod	

	Checking Out	Checking Out		Checking In	
	Comments	Initials	Comments	Initials	
Bags x 2					
Blow Up Mattress x 2					
Pump					
Tent					
Poles x 18					
Parts checklists - Safe an					
Parts checklists - Safe an	Checking Out		Checking In		
		Initials	Checking In Comments	Initials	
Parts checklists - Safe an  Bags x 3	Checking Out	Initials		Initials	
Bags x 3	Checking Out	Initials		Initials	
Bags x 3 Mattress	Checking Out	Initials		Initials	
Bags x 3  Mattress  Tent	Checking Out	Initials		Initials	
	Checking Out	Initials		Initials	



Corner pieces x 8		

Travel Bed Hire safety checklists					
	Checking Out		Checking In	Checking In	
	Comments	Initials	Comments	Initials	
Check zips, clips,					
attachments are fully					
working and there is no					
wear					
Check for tears in the					
cloth					
Any other scuff marks / damage					
Instruction manual included					
Terms and Conditions are included					
Accident and Fault Reporting Form included					



deposit would be grat children with addition	Ill registered charity and any donation you may wish to make from your tefully received. A donations help us to continue to provide support for hal needs. If you would like to donate your deposit, or part of it, please leave blank if not applicable.
Amount (£)	

I agree that I am happy to borrow out the Travel Bed and that I have read the Terms and Conditions, the Instruction Manual and have reviewed the condition of the Travel Beds with the Little Hiccups Agent. I can confirm that I have also been shown how to use the Travel bed safely and will conform to the safe system of work.

Signed out on behalf of Little Hiccups	
Signed out by/on behalf of the borrower	
Date:	
Signed in on behalf of Little Hiccups	
Signed in by/on behalf of the borrower	
Date:	

All information and photos will be stored according to the Data Protection Act 1998 and the GDPR Act 2018. Information collected will be used for Little Hiccups purposes only. We will not share your information with any other companies or organisations.

Please contact us if you have any questions about our privacy notice or information we hold about you. You can contact us by email at info@littlehiccups.co.uk

You can see the full privacy notice on our website at http://www.littlehiccups.co.uk/privacy.htm

