## Chabad House MicroFridge Rental Agreement \_\_\_\_\_ Room # \_\_\_\_\_ Cell Tel. \_\_\_\_\_ Student Name \_\_\_ Roommate(s) (If sharing rental costs) \_\_\_\_ Date: MICROFRIDGES: Chabad House is making available a combination Refrigerator/Freezer/Microwave Unit on an annual rental basis for individual rooms. The rental fee is \$180 for the Academic Year per unit. If you and your roommate(s) are sharing a MicroFridge, each student must complete this Rental Agreement and submit their payment (e.g. If two roommates are sharing a unit, they must each complete this Rental Agreement and submit \$90 before the unit will be delivered.) Rental Fees are not refundable once the units are delivered. If anything goes wrong with the units during the year, Chabad House will replace the broken unit, but damages not considered normal use will be the responsibility of all the renters and will be billed accordingly. There will be a \$10 charge for any MicroFridge that is returned and has not been emptied and cleaned. No stickers, etc. are to be affixed to the units at all. Students agree to maintain the Kashrut status of the Microwave unit (i.e. using the Microwave for either Dairy or Meat dishes.) I have read the above information and am submitting payment for the MicroFridge requested. I have read and fully understand the Refund policy and agree to abide by the terms and conditions. Date\_\_\_\_\_ Paid\_\_\_\_ Signature \_ ☐ Visa ☐ Master Card ☐ Amex ☐ Discover Credit Card Number:

**Expiration Date:** 

Total amount to charge:

Billing Address:\_\_\_\_\_

Billing Zip Code \_\_\_\_\_

Authorized Signature:

Amount Paid:

Name (as it appears on card):\_\_\_\_\_

State:

☐ Check (Checks must be payable to: Chabad House Services) \_\_\_\_\_ Check No.:\_\_

☐ Same as above