



THE UNIVERSITY OF THE WEST INDIES
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FACULTY OF CULTURE, CREATIVE & PERFORMING ARTS
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COSTUMES LOAN/USAGE

NAME:		PERIOD REQUIRED:	
UWI DEPARTMENT (Internal Borrower):		TELEPHONE(S):	
ORGANISATION (External Borrower):		EMAIL:	

COSTUME(S) REQUESTED	REASON(S) FOR USE	DATE BORROWED	RETURNED (Official Use)

Signing this document constitutes agreement to the terms for loan of costume.

BORROWER:

PRINT NAME

SIGNATURE

DATE

OFFICIAL USE ONLY

DATE REQUEST RECEIVED:	APPROVED BY:	DATE:
APPROVED TO RETURN BY DATE:	FORWARDED TO:	DATE:
CONDITION ON RETURN:		