



The Oaks Community Association

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DVD Check Out Agreement

Date Checked Out: _____

Name: _____

Address: _____ Lot: _____

Phone: _____ Email: _____

Title: _____

Title: _____

Title: _____

I, the undersigned, do accept the above listed DVD(s) for the purpose of viewing them in my home. I may NOT loan them to anyone for any reason. I understand I will be charged \$25.00 if any item is lost, damaged, or not returned within 48 hours of check-out. I understand Federal Law prohibits the reproduction of all copyrighted material.

Signature: _____

Date Returned: _____

Received By: _____