



**Loyola  
Marymount  
University**

**PROP SHOP RENTAL REQUEST FORM  
SFTV**

Filled       Loaded

Student		LMU ID#	
Phone #		Director's Name	
Email		Pick-Up Date/Time	
Signature		Return Date	

Items	Quantity	Notes
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		

Crate/Loading	
HOP Signature:	