



Request: for loan of Sahara equipment for upcoming
Special Olympics Healthy Athletes Health Promotion Event.

Equipment requests are honored on a first come, first served basis. To reserve equipment for an upcoming event, contact Mary Pittaway (cell) 406-544-3969 or (home) 406-543-8892 (Fax) 406-258-4906 email mpitt59802@aol.com.

Name of Special Olympics Program _____

Dates of screening event _____

Name of Clinical Director _____

Address _____

Phone _____ Email _____

How many athletes do you anticipate screening for bone density? _____

Person authorized to receive and sign for equipment (shipped by Fed Ex):

Name and Title _____

Shipping address _____

Daytime Phone _____ email : _____

Person responsible for guaranteeing the machine will be protected from theft, stored and used in a warm environment (e.g. don't leave on someone's porch or in a cold warehouse); used as instructed in the Health Promotion Clinical Directors Handbook of Operations, 2007

Name and title _____

Address _____

Phone number _____ e-mail _____

Person responsible for assuring return of the equipment within 24 hours following close of the screening event; as per the detailed repacking instructions:

Name and Title _____

Address _____

Daytime Phone number and _____ email _____