

SEWING MACHINE REQUEST FORM

Girl Scouts of River Bluffs Council EQUIPMENT REQUISITION ON-SITE

Name of Person _____ Troop # _____

Phone (D) _____ (E) _____

Date Needed _____ Time _____

Return Date _____ Time _____

**Each machine requested requires a \$2.00 fee for maintenance and needle replacement
These machines can only be used at the Service Center.**

5 Sewing Machines Available

Number of Machines requested _____ Fee Paid \$ _____

SPECIAL REQUESTS:

1-6320-40