



SCHLAFLY BEER KEG RESERVATION FORM THE SCHLAFLY TAP ROOM

Order taken by: _____

Date: _____

Name: _____ Home Phone: _____

Address: _____ Zip: _____ Work Phone: _____

DAY/DATE NEEDED: _____ EST. PICKUP TIME: _____

STYLE: _____
SIZE: _____ QTY: _____
KEG#: _____ TAP? Y N

STYLE: _____
SIZE: _____ QTY: _____
KEG#: _____ TAP? Y N

Notes:

STYLE: _____
SIZE: _____ QTY: _____
KEG#: _____ TAP? Y N

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SIZE: _____ QTY: _____
KEG#: _____ TAP? Y N

DEPOSIT(S): \$ _____
credit only – NO exceptions!

KEG(S): \$ _____

RENTAL FEES: \$ _____

TAX: \$ _____
if tax-exempt, must attach letter

TOTAL: \$ _____
cash credit

DEPOSITS: Your deposit must be secured with a credit card. If equipment is returned damaged, charges will be processed for repairs or replacement, as necessary. If equipment is retained beyond 45 days, your credit card will be billed for the deposit and the rental fees incurred.

RETURNS: Each piece of equipment is on loan free of rental charges for the time period indicated below; thereafter, it is subject to a \$1.00/day rental charge payable at the time of return.

These policies also apply to donated kegs.

Your equipment is subject to rental fees, as follows:

TAPS, after 7 DAYS = _____

KEGLETS, after 21 DAYS = _____

KEGS, after 30 DAYS = _____

Checked out by: _____

.....

Checked-in by: _____

Date: _____

Notes: see reverse

I have read and agree to the keg rental policies.

Signature Date

Print Name