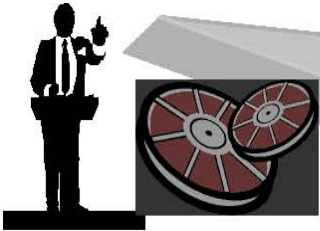


## California Employers Association Safety Training Video Lending Program Order Form



Please list the safety training video tape(s) you would like to borrow (**ONE at a time**). Tapes will be loaned on a **first come, first served** basis. Fax this order form to: (916) 921-6010. If you have questions about this program, please call the CAE office at 1-800-399-5331 for further assistance.

### Choose Your Video

Please list the video that you would like to borrow: \_\_\_\_\_

**All orders must include the video number**      Video Title \_\_\_\_\_      Video Number \_\_\_\_\_

Alternate Choices: \_\_\_\_\_

\_\_\_\_\_      Video Title \_\_\_\_\_      Video Number \_\_\_\_\_

**Please advise if you would like VHS or DVD**

\_\_\_\_\_      Video Title \_\_\_\_\_      Video Number \_\_\_\_\_

### Safety Training Video Lending Program Terms and Conditions

By my signature below, I acknowledge, authorize and agree to abide by the following terms and conditions of the CAE Safety Training Video Lending Program:

1. My company must be a CAE member in good standing.
2. No more than **one** tape may be borrowed at one time.
3. The **lending period** is for 14 days, unless advised otherwise, which **includes** the **return mail time**.
4. The tape **must** be returned, **at my expense**, via a service that can provide a means of tracing shipments with proof of delivery. Additionally, **videos should be insured for \$400.00** per tape to ensure that replacement cost is covered in the event they are lost in the return shipping. Tapes **must be received** at: National Resource Safety Center y 3621 S. Harbor Blvd., Suite 250 y Santa Ana, CA 92704 **by the due date** listed on the packing slip. The borrower agrees to accept all responsibility for the safe return of all programs borrowed.
5. If the tape(s) are **returned late**, I authorize my credit card to be charged a **\$15 per day/per video late fee**.

Name: \_\_\_\_\_ CEA# \_\_\_\_\_

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Date **Needed**: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month    Day    Year

City/State/Zip: \_\_\_\_\_ Alternate Dates: \_\_\_\_/\_\_\_\_/\_\_\_\_    \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please Complete the Following:**     MC     Visa     AmEx    Expiration Date: \_\_\_\_/\_\_\_\_

Credit Card#: \_\_\_\_\_

Cardholder's Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_

**RETURN BORROWED TAPES ALONG WITH PACKING SLIP TO:**  
**National Resource Safety Center • 3621 S. Harbor Blvd., Suite 250 • Santa Ana, CA 92704**