

**The George Washington University
Recreational Sports & Fitness Services
Sport Club Equipment Inventory Form**



CLUB: _____ OFFICER: _____

PHONE: _____ DATE: _____

PLEASE PRINT OR TYPE

# OF PIECES	EQUIPMENT DESCRIPTION	CONDITION	STORAGE LOCATION	DATE

- CONDITION OF EQUIPMENT:**
EXCELLENT - (new or hardly used)
GOOD
FAIR
POOR – (equipment is no longer safe to use)

Place an () next to equipment that has been thrown out*

I HEREBY CERTIFY THAT THE INVENTORY LISTED ABOVE IS A COMPLETE LISTING OF SPORT CLUB EQUIPMENT PURCHASED WITH GW ALLOCATED FUNDS.

SIGNED: _____ SPORT CLUB OFFICER

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INVENTORY ACKNOWLEDGED AS COMPLETE: _____ REC SPORTS DIRECTOR