## College Services 705 5<sup>th</sup> St SE Barnesville MN 56514 Phone (218) 354-2107

## LETTER OF ASSIGNMENT

I,(Name) (Posid	ence Hall) (Room #)
(Name) (Residence Hall) (Room # Would like to assign my rental contract for the (refrigerator/bed loft) to:	
Name:	
School	
School.	
Residence Hall:	Room #:
Cell and/or School Phone: ()	Home Phone: ()
Home mailing address:	
Street:	
City:	State: Zip:
I wish to transfer my rental contract	I agree to and accept the terms
And all monies paid to the assignee.	of the original contract.
Assignor (original renter)	Assignee (new renter)
Date Signed	Date Signed
LOFT RENTAL ONLY:	

I understand that the use of this loft and/or side rail is undertaken at my personal risk. I assume all risk whatsoever of personal injury, or death, whether of myself or others, as well as property damage resulting from the use of this loft and side rail. I further agree to release and hold lessor harmless from any and all liability for any claims, demands, injuries, actions or causes of action, whatsoever, arising out of the use of this loft and/or side rail device. I agree that the loft device is for my personal use and is not designed to support two or more persons.

Signature\_

Assignee (new renter)