



THE STRATEGY GROUP, LLC
ENTERTAINMENT DIVISION

104 Hammett Pond Ct. Greer 29650 864.671.0030

Rental Agreement:

Thank you for selecting The Strategy Group , LLC Entertainment Division for your current project needs.

It is important to follow the guidelines listed below:

1. All accounts must provide a certificate of insurance naming The Strategy Group , LLC Entertainment Division as additional Insured and loss payee with hired auto coverage and a minimum of one million dollars in limit. No vehicle will be released without this certificate.
2. Rental deposits need to be provided to the rental department prior to rentals. All deposits must be transacted by Credit Card or Wire Transfer. The Strategy Group , LLC Entertainment Division cannot accept checks for deposits.
3. Deposits are held as security for overages on rentals and/or to cover damages.
4. Please note any and all balances due will be charged to the provided Credit Card. You will be notified of all charges.
5. If damages or rental overages occur, we will notify you as soon as possible. We understand that damages may occur that are both planned and purely accidental. Please notify The Strategy Group , LLC Entertainment Division of any possible damages related to your shoot. We may be able to help you avoid unexpected expenses or direct you to a less expensive alternative. In the event of damage to a vehicle we will charge the provided Credit Card.
6. You may have any damaged vehicle repaired at your expense at a shop approved by us. Be advised if you desire to do so, the vehicle will remain on rent (downtime) and any repairs will have to meet with our approval.
7. The Strategy Group , LLC Entertainment Division makes no claim to the rights or usability of the image, brand or logo of any vehicle or product it rents/leases. All manufacturer clearances and or fees due are the responsibility of you the renter/lessor as acknowledged by your signature to this agreement.

The Strategy Group , LLC Entertainment Division

Type of Credit Card: American Express MasterCard Visa Other:

Amount to be charged: \$ _____ Amount to be Authorized: _____

Card Number: Expiration Date: Security Code: _____

Address: City: State: Zip Code: _____

Production Company: _____

Show Name: _____ Accepted By: Date: _____

Name : _____

(please sign and return with show information sheet)