

**The Ward Foundation, Inc.**  
**Ward Museum of Wildfowl Art, Salisbury University**  
**909 South Schumaker Dr., Salisbury, MD 21804**  
**410-7424988      FAX 410-742-3107**

***Loan Agreement***

**The Ward Foundation, which operates the Ward Museum of Wildfowl Art, Salisbury University, acknowledges receipt on loan of the following:**

Object Description

Insurance Value

**From (Lender's name and address):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tel. \_\_\_\_\_

E-Mail \_\_\_\_\_

**In order that your interests as owner may be properly protected, and the Ward Foundation's interests as custodian may be properly defined so far as damage to or loss of this (these) items is concerned, it is understood and agreed that the Ward Foundation will furnish every reasonable care and protection of the owner's property listed above, including insurance of loans.**

**Received by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**I am the Lender or the authorized agent of the Lender and have read the conditions here and on the reverse side of this loan agreement and I agree with these conditions.**

**Lender's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Period of Loan: From date received** \_\_\_\_/\_\_\_\_/2021 **To (date)** 5/31/2022

\*\*\*\*\*

**Returned to owner:** \_\_\_\_\_ (Date)

**Ward Foundation/Museum Representative:** \_\_\_\_\_  
\_\_\_\_\_

**Received by owner:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Signature)