  “***To Protect and to Save”***

**LIONS DISTRICT 4-C4**

**Operation Guardian Angel**

**REGION 4 ZONE 2**

**AED RESPONSIBILITY SIGN-OUT FORM**

***(AED MOBILE UNIT #2)***

**By assuming possession of the Automatic External Defibrillator (AED), you will be personally responsible for the safety and care of this item. To avoid loss or theft of this item, you must insure that this item is within your possession and under your personal control at all times.**

**Additionally, you will only use the item in accordance to the instructions for its proper operation and only after having current certification in CPR and after reviewing the instructions and video on the safe usage of this AED.**

**NAME (PRINT) LIONS CLUB DATE OUT RETURNED INITIALS**

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