



## Fruit & Vegetable Costumes and Exhibit Board Request Application

Please supply the following information to request the fruit and vegetable costumes and/or Fruit and Vegetable Program Exhibit Board. Submit your request 4-6 weeks prior to requested date to ensure availability of costumes/board and allow time for the processing of request application.

*NOTE: During peak demand periods, time restrictions may be placed on the use of both the costumes and the exhibit board. The number of costumes may also be limited.*

*Please email this form to [fvcostumes@dhec.sc.gov](mailto:fvcostumes@dhec.sc.gov), or mail SC DHEC, Bureau of Community Health and Chronic Disease Prevention, 1800 St. Julian Place, Columbia, SC 29204. You will receive a confirmation indicating the availability/unavailability of the costumes/board.*

DHEC Employee Applicant: \_\_\_\_\_

**OR** Individual/Organization (Non-DHEC) Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### Items Requested: *(Please check items)*

#### COSTUMES

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Apple Costume         | <input type="checkbox"/> Peach Costume        | <input type="checkbox"/> Carrot Costume (2) |
| <input type="checkbox"/> Cabbage Costume       | <input type="checkbox"/> Broccoli Costume (2) | <input type="checkbox"/> Strawberry Costume |
| <input type="checkbox"/> String Bean Costume   | <input type="checkbox"/> Watermelon Costume   |   |
| <input type="checkbox"/> Yellow Squash Costume | <input type="checkbox"/> Corn Costume         |   |

#### FRUIT & VEGETABLE NUTRITION EXHIBIT BOARD

Date(s) Costume(s) and/or Exhibit to be Used: \_\_\_\_\_

Date Costume(s) and/or Exhibit to be Picked Up from DHEC\*\*: \_\_\_\_\_

Date Costume(s) and/or Exhibit to be Returned to DHEC\*\*: \_\_\_\_\_

**\*\* Arrangements for *pick-up and return* must be made in *advance*.**

### FOR ADMINISTRATIVE USE ONLY:

The item(s) you requested are:  Available  Not Available

*If available, you must pick-up and return all items to DHEC on/by the agreed dates. If an organization outside of DHEC is requesting the costumes, the requestor will also receive a Memorandum of Understanding (MOU) to sign and return to DHEC as soon as possible.*

Date Request Received: \_\_\_\_\_

Date Confirmation and/or MOU Sent: \_\_\_\_\_



# MEMORANDUM OF UNDERSTANDING

**PLEASE READ CAREFULLY**

***Please pick-up and return costumes to 1800 St. Julian Place, 3rd Floor Room 6.  
Please plan for additional assistance when picking up and dropping off costumes.***

The costumes are the property of the South Carolina Department of Health and Environmental Control (DHEC). The Bureau of Community Health and Chronic Disease Prevention is loaning the costumes contingent upon agreement to the following:

1. \_\_\_\_\_ is to be held liable if costumes are damaged because of negligence, misuse, or loss, etc. while in their possession. We expect the costumes to be returned in the same order in which we send them out (each piece with its costume). You are responsible for cleaning the parts of the costume that are worn on your person.
2. To make appropriate arrangements to pick-up and return the costumes to the Bureau of Community Health and Chronic Disease Prevention by the date agreed to at the bottom of the request form.

***Bureau of Community Health and Chronic  
Disease Prevention***

***By:*** \_\_\_\_\_

***Date:*** \_\_\_\_\_

***Responsible Party***

***By:*** \_\_\_\_\_

***Signature of Responsible Person***

***Name:*** \_\_\_\_\_

***Please Print***

***Title:*** \_\_\_\_\_

***Affiliation:*** \_\_\_\_\_

***Date:*** \_\_\_\_\_