



INSTITUTIONAL BORROWER'S APPLICATION

Institutions in Durham County and agencies of Durham County government are eligible to apply for an institutional card. An institution is defined as: day care, kindergarten, preschool, school, prison, rest home or hospital.

The purpose of the card is to supplement the materials needed by institutions/agencies to fulfill their missions. (The card is not intended for individual employee use; individuals must apply for a library card and pay the out-of-county fee, if applicable.) If the purpose of the institutional card is abused, the library will terminate the institution's/agency's borrowing privileges.

The institutional card must be presented at the time of checkout.

The same regulations applying to individual adult resident borrowers apply to institutions/agencies. However, institutional cards must be renewed annually.

Applications for institutional cards must be approved by the Circulation Manager at the Main Library. (Institutions served by the Bookmobile must have their applications approved by the Bookmobile staff.)

PLEASE PRINT:

Name of institution/agency: _____
(Use official name, including name of parent institution, if applicable.)

Street Address: _____

City: _____ State: _____ Zip: _____ County: _____

Phone: _____ E-mail: _____

Name of Person Making Application: _____

Title: _____ Signature: _____

The fiscal agent, owner, treasurer or other individual duly authorized to accept financial responsibility for materials borrowed on this card must complete the information below. Financial responsibility includes full payment for any lost materials or equipment, the cost of repairs/replacement of damaged equipment or materials (cost determined by the library) and any fines and fees charged for overdue items. The institution is fully responsible for controlling the use of the institutional card. The institution must notify the library if the fiscal agent changes.

Name of fiscal agent: _____

Title of fiscal agent: _____

If different from above:

Agency: _____

Address: _____

I have received a copy of the Institutional Borrower's Information Sheet, which includes the limits and responsibilities, as well as information about replacement cost for lost items.

Signature of fiscal agent: _____

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Date: _____ Staff initials: _____