



LIBRARY MATERIALS REQUEST FORM

Personal Information:

First Name: *		Last Name:	
Phone: *		Ext:	
Address: *		Address 2:	
City/Town: *	State/Province: *	Zip/Postal Code: *	
1. Shelf Number, Title/Copy # (if available)			
2. Shelf Number, Title/Copy # (if available)			
3. Shelf Number, Title/Copy # (if available)			

Details:

YOU AGREE to the following when borrowing materials from STAR NET Region II:

1. A maximum of 3 ITEMS may be borrowed at a time.
2. Materials are DUE BACK 1 MONTH from date borrowed.
3. You are responsible for first-class postage for return, or will return materials in person.
4. You are responsible for the cost of replacing any lost or damaged materials you borrow.

BORROW MATERIALS:

Complete MATERIALS REQUEST FORM online or download/print
 Fax, email, or phone request to STAR NET Region II:
 Phone: 224-366-8579 Fax: 847-278-5434
 Email: gmusielski@cntrmail.org

Materials will be mailed to you, or you may pick them up from STAR NET Region II office.

Office Use Only:

Request filled by: _____ Entered in Database Shelf Card

Reminder Notice Overdue Notice: ____/____/____ Returned Database Updated



Complete and return this form to **STAR NET Region II**
 2626 South Clearbrook Drive, Arlington Heights, IL 60005
 Phone: 224-366-8579 Fax: 847-278-5434
 Email: starnetregionii@cntrmail.org