

NC Child Care Health and Safety Resource Center Library
1100 Wake Forest Road, Suite 100
Raleigh, NC 27604

To print the form, go to the toolbar and click on File, select print, and choose “print current page”. Complete form and fax to - 919-834-5068 - attention L. Dickson

Library Request Form

Borrower Information

Name: _____

Organization: _____

Shipping Address: _____

City, State, ZIP: _____

Mailing Address: _____

City, State, ZIP: _____

Phone: _____

Email: _____

Title	Date Needed	Out	In

I agree to the following policies.

Once received, the library materials are my responsibility until they are returned and received by the Resource Center. If they are lost or damaged, I agree to pay for replacement costs. We recommend that borrowers insure the materials to cover replacement costs in case they are lost in delivery.

Signature _____ Date _____