Patron Information Form

last name  first name

street address or WU campus box  apartment #

city  state  postal code / country (if not U.S.)

email  phone

notes / other information (optional)

Affiliation, as applicable:
☐ WU undergrad  ☐ WU graduate student  ☐ WU faculty  ☐ WU staff  ☐ WU alumnus
☐ community member  ☐ donor  ☐ other affiliation ________________________________

Purpose(s) of research:
☐ administrative  ☐ thesis/dissertation  ☐ personal interest  ☐ reunion  ☐ class
☐ publication  ☐ on-line/website  ☐ media production  ☐ exhibit  ☐ other____________________

★ Statement of Responsibility
I certify that the information on this form is correct and that I have read and agree to abide by the rules and procedures set forth in the Materials Use Policies. I further agree to defend and hold harmless Washington University, its Washington University Libraries and Department of Special Collections, its Board of Trustees, and its Officers, Employees, and Agents against all claims, demands, costs, and expenses including attorneys’ fees incurred for any and all claims of copyright infringement or any other legal or regulatory cause of action arising from my use of Special Collections materials.

patron signature  date

For Staff Use

Area(s):  ____ FMA  ____ MGHL  ____ MSS  ____ RB  ____ WUA  ____ PAA  ____ LH  ____ Other:

Interactions:  In-person ____________________________________________________

Phone ____________________________________________________________

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