

Hanford Site Users Only
Washington State University Libraries User Card Application
(Please Print Clearly)

Name (Last) (First) (Middle)

(Mail Stop)

Hanford Site **WA** **99354**
(City) (State) **(Zip)**

(Birth Date) (HID #)

(Employer)

(509) 372-7440 _____
(HTL Circulation Desk) (Work Phone)

Have you ever attended or worked for WSU? Y N

I hereby apply for permission to the WSU Libraries, to borrow books and other library materials from the Libraries.

I agree to observe all the rules and regulations which govern library use at Washington State University and to be solely responsible for any and all use made of the

If the card issued to me is lost, I agree to report the loss immediately to the WSU Libraries. A replacement card will be issued.

A card is issued for a calendar year and will be required to be validated for each ensuing calendar year. All library charges must be paid before a card will be revalidated.

Signature of Applicant Date