

Loan Program Request Form

Please type or print clearly

Item(s) Requested:

Borrower's Name:

Institutional Affiliation:

Is the ASA Institutional Membership in good standing? Yes No

Mailing Address:

Phone Number: E-mail:

How will the borrowed item(s) be used?

.....
.....
.....
.....
.....

What method of shipment will be used to return the borrowed item(s)?

.....

When is/are the item(s) required by? When will item(s) be returned?

.....

By signing and submitting this item request form, I acknowledge that:

- Borrower holds responsibility for lost or damaged item(s)
- Item(s) will be shipped back through an organized company
- Any issues with the item(s) must be reported to the Executive Director of the Archives Society of Alberta

Signature of Borrower: _____ Date: _____

Please send/fax completed form to:

The Archives Society of Alberta
Suite 407, 10408 – 124 St
Edmonton, AB T5N 1R5
Email: admin@archivesalberta.org
Tel: (780) 424-2697 Fax: (780) 425-1679