

UNIVERSITY OF OKLAHOMA LIBRARIES

BORROWER'S PERMIT REQUEST FORM (Oklahoma Residents Only)

\$50 Fee for 12 Month Permit

NAME: _____

Last	First	MI
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ADDRESS: _____

CITY: _____ **State:** _____ **Zip:** _____

Date of Birth: MO_____ **DAY**_____ **YEAR**_____

Oklahoma Driver's License/State Identification Number: _____

Contact Number: _____

Email: _____

In person: please bring this form to the Library Administration Office located in Rm. 212NW, with your payment (EXACT CHANGE or CHECK only) during regular business hours.

By mail: please send the form and payment (CHECK only) to:

**Bizzell Memorial Library
Accounting Office
401 W. Brooks Street, Rm. 212NW
Norman, OK 73019**

MAKE CHECK PAYABLE TO: University of Oklahoma Libraries

THE ABOVE AMOUNT ENTITLES THE APPLICANT TO ONE (1) YEAR'S USE SUBJECT TO THE RULES AND REGULATIONS OF THE UNIVERSITY OF OKLAHOMA LIBRARIES. APPLICANT MUST BE AN OKLAHOMA RESIDENT.

CIRCULATION USE ONLY:

CLEARANCE: _____ **PERMIT ISSUE DATE** _____

DEAN'S STAFF USE ONLY:

DATE: _____ **SIGNATURE:** _____

APPLY PAID STAMP
HERE