

UK FACULTY AND STAFF

**UNIVERSITY OF KENTUCKY LIBRARIES
PATRON REGISTRATION FORM**

PLEASE PRINT:

NAME: _____
(Last) (First) (Middle)

SOCIAL SECURITY NUMBER:

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BARCODE:

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PATRON GROUP: UK Faculty and Staff

ADDRESS: Check box for preferred address to receive library correspondence

Permanent Address: Home

Address	
City	State/Prov.
Zip/Postal	Country

Home Phone Number

Temporary Address: (circle one) Campus or Department

Address	
City	State/Prov.
Zip/Speed Sort	

Campus/Department Phone Number

E-mail:

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**** It is the patron's responsibility to notify the library staff of any address change (INCLUDING E-MAIL)****

FOR OFFICE USE ONLY

When entering addresses, click on "hold mail" for any addresses that are not checked as the preferred mailing address. **Note: DO NOT click on "hold mail" for the Permanent Address at any time**

EXPIRES: ONE YEAR AFTER DATE SUBMITTED
PURGE DATE: TWO YEARS AFTER DATE SUBMITTED

STAFF/STUDENT ASSISTANT'S NAME: _____

Revised 06/08/00