

DUTCHESS COUNTY MUSIC EDUCATORS ASSOCIATION
RECORDING LIBRARY LOAN APPLICATION

Name: _____	Date: _____
School: _____	
Address: _____	
City: _____	ZIP: _____
District: _____	School Phone: _____
Home Phone: _____	Email: _____
How do you want to receive the music (please circle ONE):	
Sent through BOCES mail	OR
	Pickup at Library Location

The library is located at Arlington High School, 1157 Route 55, LaGrangeville, NY 12540
 Contact Rich Guillen at rguillen@acsdny.org (preferred) or 486-4860, ext 1211

GUIDELINES FOR BORROWING RECORDED MEDIA

1. Please keep in mind that this recording media is **BORROWED** and must be **RETURNED** in the same **GOOD** condition as when you received it. You are responsible for any damaged or lost recorded media.
2. All recorded media must be returned **WITHIN ONE MONTH** of date it is borrowed/received. You/your school will be billed for media not returned after one month of the borrowed/received date.
3. Only forms that are filled out completely will be processed. You will be borrowing an entire concert's worth of recordings- separate titles are not available.
4. Please keep a copy of this form for your records and return the original to the librarian.

Year	Festival	Type of Media (CD, Cassette, VHS, DVD)

Borrower's Signature: _____

 Date Returned: _____

Checked in by: _____

Condition: _____