l,	as	within
(name)	(position of authority)	(Institution Name)
hereby authorize the issuance	of an Institutional Library Card	to be overseen by,
(name)	, and to be used to borrow m	naterials to meet our organizational needs.
Our organization will assume incurred, as well as for lost or	damaged materials. I understan ccess BPL's online databases. I u	materials borrowed on this card, for fines d that this card must be renewed every inderstand this card will expire after one
Signature & Title of	Authorizing Individual	Date
Contact Information for Instit	utional Card Account:	
Institution Name:		
Institution Mailing Address (st	reet, city, zip):	
Individual responsible for noti	ces and billing:	
Email address of individual res	sponsible for notices and billing:	
Telephone Number of individu	ual responsible for notices and b	illing:
PIN (any four numbers):	(all cards	will use the same PIN)
If you are designating one or r	more individuals to use the Prim	ary Institution Card:
Name:		
Email address:		

Email address.	
Phone:	