Document Delivery Service Registration Form

Submit this form to one of the libraries listed below in person or by fax.
Biomedical Library Fax 310.206.8675 • Law Library Fax 310.206.3680 • Management Library Fax 310.825.1794 • Research Library Fax 310.825.4139

Name

Daytime Telephone Number - include area code

Email Address

Campus or street address:

Address

City, State, Zip Code - or - Campus Mail Code

UCLA BruinCard or Library Account Number

Status: check one
☐ UCLA Faculty
☐ UCLA Graduate Student
☐ UCLA Undergraduate Student
☐ UCLA Staff

Default Library (Required)

Select ONE of the libraries listed below as your contact library. This will also be the preferred site for any materials designated for “library pick-up” delivery.

Note: Complete contact information for these libraries is available on the Web at <http://www.library.ucla.edu/service/contacting-document-delivery-center>.

☐ Biomedical Library
☐ Law Library
☐ Management Library
☐ Research Library
☐ Science and Engineering Library/Engineering and Mathematical Sciences

Preferred Delivery Method for Copies
Select ONE option:
☐ Web Delivery
☐ Library Pick-Up
☐ Campus Mail

Preferred Delivery Method for Book Loans
Book loans are delivered to either the designated contact library or campus addresses only.

☐ Library Pick-up (default)
☐ Campus Delivery (provide campus address in the space on the left)

Method of Payment
Select ONE. For recharge account information, contact your departmental administrative assistant.

☐ To Be Billed. Will be invoiced monthly. Invoice payable by check and credit card as per instructions on the invoice.
☐ Departmental Recharge

Department Name

Department FS Number (four-digit departmental code)

Recharge ID Number

Print Authorized Name

Authorized Signature

Contact Name

Contact Telephone Number

Agreement
I hereby authorize the UCLA Library’s Document Delivery Service to process all requests submitted by me. I agree to pay any charges incurred for the service and confirm that the material requested is for personal use, private study, scholarship, and research only. I further affirm that this reproduction order is in compliance with the University of California Policy and Guidelines for the Reproduction of Copyright Material for Teaching and Research.

Signature ___________________________ Date ___________________

For Office Use: ___________________________ ____________________

Accepted by ___________________________ Entry Date ____________________