

# Researcher Registration/Request

Special Collections of the National Agricultural Library

Please Print

Date

Last Name

First Name

M.I.

Street Address

City

State

Zip Code

Country (Non-U.S.)

Home Phone

Business Phone

Ext.

Fax

E-mail

Identification: check most applicable

Student  
 Faculty } Educational Affiliation

USDA     USDA Retired     NAL Staff     Research Assistant -- Affiliation

Other (please specify)

Subject of Research/Request

---

---

---

---

I have read the National Agricultural Library, Special Collections Reading Room Rules for Use, and I agree to abide by them. I realize that I am responsible for conforming to copyright, right-to-privacy, and any other applicable statutes. I agree to indemnify and hold harmless the U.S. Department of Agriculture, the National Agricultural Library, its officers, employees, and agents from any and all claims resulting from the use of materials in the Special Collections. I understand that failure to comply with these rules may result in the denial of access to the collections.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

In the event that it appears to the Special Collections staff that your research parallels that of another researcher, do you wish to have your name, address, and research topic released to the other researcher?    \_\_\_\_ (yes)    \_\_\_\_ (no)