

# SIRSI Library Card Registration Form

## Grad or Undergrad

(Please PRINT, Fill Out completely)

**Name:**

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_ Full

**Optional:**

Preferred First Name (if different from legal name): \_\_\_\_\_

**Local Mailing Address:**

Street or PO Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_

**Permanent Mailing Address** (if different than address above):

Street or PO Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_

**UAF E-Mail Address:** \_\_\_\_\_

**User Status:**

1.) University of Alaska Status: Grad \_\_\_\_\_ Undergrad \_\_\_\_\_

2.) UAF ID #: \_\_\_\_\_

<b>For Staff Use:</b>	Accepted by:
Patron ID (Write ID # here)	Initials: _____
	Date: _____
Patron Type: _____ GRAD, _____ UNDERGRAD	Entered:
#####	Initials: _____
Expiration Date: _____	Date: _____
Notes: _____	Verified:
Notes: _____	Initials: _____
Notes: _____	Date: _____