

# Highlands Regional Library Cooperative

## Delivery Service for HRLC Members: Adding a Day or Requesting Start-Up



FAX to 973-664-1780    ATTN Gail Schuldner

Our library would like to:	
<input type="checkbox"/> Begin 2 day/week service	
<input type="checkbox"/> Purchase _____ additional day(s) of service	
Library Name:	
Contact:	
Address 1:	
Address 2:	
City, State, Zip Code:	
Telephone:	
Fax:	
E-mail:	
Billing Address 1:	
Billing Address 2:	
City, State, Zip Code:	
Please describe where the driver should enter the building and give directions to the library or where deliveries/pickups should be made:	
Please describe where deliveries should be made (e.g., Circ desk, Main Office, etc.)	
I have read the <i>Regional Delivery Service Guidelines</i> found at <a href="http://www.hrlc.org/delivery-guidelines.htm">www.hrlc.org/delivery-guidelines.htm</a> and agree to all terms and conditions, including submitting Delivery Statistics.	
_____ Signature	_____ Date