

**UNIVERSITY
LIBRARY**



**CORPORATE MEMBERSHIP PLAN
MEMBERSHIP APPLICATION & PATRON INFORMATION FORM**

PLEASE PRINT

Company FEIN # _____

Company Name _____

Business Address _____ Suite # _____

City _____ State _____ Zip Code _____

Business Phone _____ Fax _____

Email _____

Please read and sign

I understand that I am the only one permitted to use my Corporate Membership Card and that my company is responsible for all materials I borrowed and I agree to abide by all pertinent University Library regulations.

(Employee User #1 Print Name and Sign)

(Employee User #2 Print Name and Sign)

(Employee User #3 Print Name and Sign)

(Employee User #4 Print Name and Sign)

(Employee User #5 Print Name and Sign)

The Corporation understands it has final responsibility for materials borrowed by individual corporate employees in the UIC Library Corporate Membership Plan and for any fees assessed by the Library. The Corporation agrees to abide by all pertinent University Library regulations.

(Signature, Authorized Corporate Officer) (Date)

Mail to: University Library/Corporate Membership Plan
Business Office (M/C 234)
University of Illinois at Chicago
801 S. Morgan St. MC234
Chicago, IL 60607

Credit card payments not accepted. Make checks payable to: **The University of Illinois – University Library**

Office Use:

Date: _____

Card # _____

Check \$ _____ Ck # _____ Ex. Date _____