

Copy Application Form

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| Date | / | / |
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Dear Director of Okayama Prefectural Library,

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| Name or Card number | |
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I would like to apply for copies of materials under the following conditions:

- 1 I will make copies only of materials which don't claim copyrights.
- 2 I will make only one copy of each page.
- 3 I take full responsibilities in case of infringement against the Copyright Law.

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| Call Number | Title | | Number of pages | | | | |
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*Fill out the form and hand it to the counter staff.
Please report to us how many pages you have made copies of.

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| Staff Name | | |
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