

DOUGLAS PUBLIC LIBRARY

APPLICATION FOR LIBRARY TOUR

560 10th St., Douglas, AZ 85607 ~ www.cochise.lib.az.us/douglas.html ~ (520)417-7357

Applicant Information	Group Information
Contact Person: _____	Number of Adults: _____
Organization/School: _____	Number of Children: _____
Street Address: _____	Age or Grade Level: _____
Daytime Telephone: _____	Purpose of Visit:
Fax: _____	☐ General Tour
E-mail: _____	☐ Research Project
	☐ Other: _____

Scheduling Your Tour

All tours must be scheduled a minimum of two weeks and a maximum of three months in advance.

First Choice Tour Date: _____ **Tour Time: Begin:** _____

Second Choice Tour Date: _____ **Tour Time: Begin:** _____

Third Choice Tour Date: _____ **Tour Time: Begin:** _____

Language Preference: _____

Needed Accommodations: _____

Additional Information: _____

Preparing your group for a visit:

- ☐ Discuss appropriate behavior in the library, which includes respect for others using the library and care of library materials.
- ☐ If group requests library cards to be issued, the contact person must pick up a registration form for each applicant and have them filled out with all required signatures.
- ☐ Submit library card registration forms at least one week prior to the date of the requested tour.

General Tour Includes:

- Being shown different areas of library
- learning about library services
- Story Time (for younger grades)
- Presenting of library programs
- Chance to browse through a selected part of the library collection

You will be notified of confirmation in person, by fax, phone, or e-mail.

Signature of Applicant _____ Date: _____

STAFF USE ONLY	
Tour Confirmed: _____	Date: _____
Tour Guide: _____	