



Staff accepting this job initial and date here:	
_____	_____
initials	date

### 3D PRINTER REQUEST FORM

By signing this statement, I am agreeing that I have read and understand the terms of the Library's *3D Printing Policy* and will to abide by it. I relinquish any responsibility on behalf of the Sayville Library's liability in the printing process or use of the printed object.

Date of Submission: \_\_\_\_\_

Patron Name: \_\_\_\_\_

Patron Library Barcode: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of File(s): \_\_\_\_\_

\_\_\_\_\_

Parent/Guardian Signature (if under 16): \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_