

**SA WATER LIBRARY**

**RESOURCES BOOKING FORM**

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

School: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ DECD Courier Round No: \_\_\_\_\_

Resource Title	Date required:

**\*Limit of 8 items per person**

I will be picking the resources up on \_\_\_\_\_ [date]

OR

I would like the resources posted to the above address

**If you have not yet registered with the Library, please also fill in the online registration form.**