

West Virginia and Regional History Center  
and Special Collections  
West Virginia University Libraries

## Researcher Registration

Name: (First) \_\_\_\_\_ (Middle Initial) \_\_\_\_\_ (Last) \_\_\_\_\_  
**(PLEASE PRINT)**

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

City, State, ZIP: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

Identification No. (**staff must check I.D.**): \_\_\_\_\_

Please indicate topic(s) of interest by checking the appropriate blank(s):

\_\_\_\_\_ history                      \_\_\_\_\_ West Virginia University

\_\_\_\_\_ genealogy                      \_\_\_\_\_ other

If affiliated with an academic institution, please check the appropriate blank:

\_\_\_\_\_ student (name of school, if other than WVU: \_\_\_\_\_)

\_\_\_\_\_ faculty (name of school, if other than WVU: \_\_\_\_\_)

I acknowledge that I have received, read, and understand your document, "Rules for Use," agree to comply with all the rules listed therein, and that violation of the rules is grounds for revocation of permission to use the collections. I understand that all materials in Special Collections are non-circulating and may not be removed from the premises.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Note: If you intend to bring this completed form with you on your first visit, you will be asked to sign it in the presence of a staff member.