

Participant's Information (please print clearly): (Last) (First) (Middle) Address: ____ (Street) (City) (State) (ZIP Code) If in Iowa, name of County: Email Address: Participant's School Information (Instructor, Please fill in Before Distributing to Participants): School's Name:_____ Instructor's Name: _____ Instructor's Contact Information (email/phone):_____ Date Attending National History Day at the University of Iowa Libraries: I understand that materials to be borrowed with this permit are for my personal use and are not to be loaned by me to others. I agree to abide by the regulations of the University of Iowa Libraries.

Applicant's Signature: