

# *Southern Maryland Studies Center*

## **Customer Registration Form**

In order that the Southern Maryland Studies Center may better assist you in your research, and compile needed collection use statistics, please complete the following form and return it to an attendant. Thank you.

### **Please Print**

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

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

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

Institution Affiliation (if any): \_\_\_\_\_

### *ACADEMIC STATUS* (if any):

Undergraduate \_\_\_\_\_  
Graduate \_\_\_\_\_  
Faculty \_\_\_\_\_  
Staff \_\_\_\_\_  
Other \_\_\_\_\_

### *RESEARCH PURPOSE*

Class paper \_\_\_\_\_  
Genealogy \_\_\_\_\_  
Local history \_\_\_\_\_  
M.A. thesis \_\_\_\_\_  
Ph.D. Thesis \_\_\_\_\_  
Historical research \_\_\_\_\_  
Literary research \_\_\_\_\_  
Pictorial research \_\_\_\_\_  
Other \_\_\_\_\_

Subject of research: \_\_\_\_\_

**By affixing my signature below, I certify that I have read and agree to abide by the rules and regulations of the Southern Maryland Studies Center. I understand that if I violate these rules, the Southern Maryland Studies Center may deny me use of its facilities and collections.**

SIGNATURE: \_\_\_\_\_