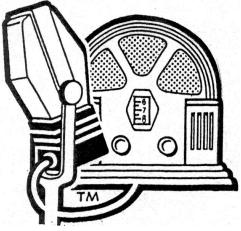


SPERDVAC Script Lending Library Order Form

Complete this form in your PDF reader and print it, or print first and fill out by hand.



Shipping Information

Name: _____ Membership #: _____

Address: _____

City: _____ State: _____ Postal or ZIP code: _____

Email: _____

Selection

Fee: 10.00 per order of up to five scripts on CD, to cover shipping and handling.

Enter the catalog numbers of the scripts you'd like to borrow:

1st Script: _____ 2nd Script: _____ 3rd Script: _____ 4th Script: _____ 5th Script: _____

Comments or special instructions:

"I will return the loaned script CD in good condition within 30 days. Late returns will be assessed an additional \$2.00 per week."

"I understand that I am borrowing material that has been provided to SPERDVAC under various agreements from owners, copyright holders, or other persons or organizations that may have required certain limitations on their use. I understand that I may make single copies of the scripts for my personal use, but I agree that I will not make any copy for sale, rent, loan, broadcast, distribution, online streaming, or any other commercial or non-commercial use."

Signed: _____ Date: _____

Enclose check or money order made out to "SPERDVAC" and mail to:
Post Office Box 125, Oroville, CA 95965.