PLEASE BRING YOUR **CARN READER’S TICKET** OR ID TO OBTAIN ONE, AS DETAILED ON [OUR WEBSITE](https://www.cumbria.gov.uk/archives/archivecentres/readers_tickets.asp)

**Name:**

**Address, line 1:**

**Address, line 2:**

**Town/City:**

**County/State:**

**Country (if not UK):**

**Email\*:**

**Preferred telephone contact number\*:**

**\*We cannot process your request without an email address and/or telephone number**

[**CARN ticket number**](https://www.cumbria.gov.uk/archives/archivecentres/readers_tickets.asp)**:**

# Preferred date(s) of intended visit:

(Subject to availability, Tuesday - Friday. Minimum One week notice)

**Preferred time slots (please mark with X = yes)**

**10am-1pm 1pm-4pm All Day**

**You may order a maximum of 10 items for a day visit (or 5 for a half-day session) at the discretion of staff**

**Please order the documents you wish to see during your visit below**

Please consult our online catalogue for document references and details. Please use a separate line for each reference.

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| **Ref no** | **Title/Description and Date details** | **Location****(Staff use**) |
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**Do you require an electrical socket for a laptop?**(please tick for YES)

**Other information/requirements** (for example, are you intending to bring any visitors with you)**:**

**For staff use:** Date received:Telephone/Personal/Email

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| --- | --- | --- | --- | --- |
| Initials | Strongroom check*Date checked, size noted and other notes eg condition or special requirements such as book cushion* | Table Nos*Translate size to tables**Eg 1**Or 1-2 (maps)**Or 1-3 (maps)* | Agreed visit date*Customer has been contacted and visit date confirmed\agreed and noted here* |  Entered on Outlook*Date entered* |
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