

**Check one:**

- New Application
- Updated Application
- Renewal Application

Library of Congress  
Acquisitions Fiscal and Support Office

**Surplus Books Program**  
**Application to Participate**

rev. 5/30/2012

**Organization Name:** \_\_\_\_\_

**Street Address** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Eligibility:** Please indicate your qualification/s for eligibility and provide your tax identification number below.

- Full-time, tax-supported or nonprofit educational institution: school, school system, college, university, museum, or public library.
- Government agency:   State   Local   Federal
- Nonprofit institution or organization that has tax-exempt status under the provisions of section 501 of the Internal Revenue Code of 1954 (see 41 CFR 101-44.207 (a)(17)) and that operates a library and/or research center open to the public.

**IRS-issued tax identification number** \_\_\_\_\_

**Book Selectors:** List the individuals or Congressional office that will select books for your organization. Library of Congress staff members may not select materials for Program participants.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Notify via email when new materials are available for selection.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Notify via email when new materials are available for selection.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Notify via email when new materials are available for selection.

Use an additional sheet if more space is needed.

**Organization's Authorized Official Requesting Approval to Participate:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Notify via email when new materials are available for selection.

**Certification:** Check each statement in acknowledgement.

- My organization or institution will be responsible to make the arrangements for the shipping of materials selected from the Surplus Books Program. This may include providing a Fed Ex or UPS account number, providing Congressional frank labels, or hand-carrying the materials. If providing frank labels, my organization or institution will make arrangements with a Congressional office to provide the labels.
- No books will be shipped without a completed and approved application to participate.
- Any knowing or fraudulent misrepresentations on this application may subject me to prosecution under federal law.
- I understand that this application must be renewed every two years.

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

**OFFICIAL USE ONLY:**

I have verified the registration form is complete and I grant access to the Book Selector for the organization or institution listed above.

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