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**The applicant hereby agrees with and accepts the above-stated conditions.**

Applicant's Signature: \_\_\_\_\_

Applicant's Printed Name: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

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

**AUTHORIZATION FOR USE**

(To be completed by the **Mount Saint Mary College Archives**)

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For the **Mount Saint Mary College Archives**: \_\_\_\_\_

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