

Central Massachusetts Regional Library System
~ Rutland Public Library~

Movie Request

Name: _____ **Phone:** _____ **Date:** _____

Title: _____ **DVD/VHS** (*Circle one or both*)

Book: **Large Type/Regular Type** (or circle both) *Audio:* **Cassette/CD** (or circle both)

Other:

For Office Use:

Publisher: _____

Date: _____

ISBN #: _____

Other: _____