



# Sign Out Sheet

Martin County Library System Book Discussion Kit Sign-out Sheet

Book Title: \_\_\_\_\_ Date: \_\_\_\_\_

Checked-out from Branch:

- |  |  |
|--|--|
| <input type="checkbox"/> Blake Library (Stuart)          | <input type="checkbox"/> Elisabeth Lahti Library (Indiantown)  |
| <input type="checkbox"/> Hoke Library (Jensen Beach)     | <input type="checkbox"/> Robert Morgade Library (South Stuart) |
| <input type="checkbox"/> Hobe Sound Library (Hobe Sound) | <input type="checkbox"/> Cummings Library (Palm City)          |

Copy 1: Name: \_\_\_\_\_

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

Copy 2: Name: \_\_\_\_\_

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

Copy 3: Name: \_\_\_\_\_

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

Copy 4: Name: \_\_\_\_\_

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

Copy 5: Name: \_\_\_\_\_

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

Copy 6: Name: \_\_\_\_\_

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

Copy 7: Name: \_\_\_\_\_

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



# Sign Out Sheet

Copy 8: Name: \_\_\_\_\_

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

Copy 9: Name: \_\_\_\_\_

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

Copy 10: Name: \_\_\_\_\_

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

Copy 11: Name: \_\_\_\_\_

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

Copy 12: Name: \_\_\_\_\_

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

Copy 13: Name: \_\_\_\_\_

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

Copy 14: Name: \_\_\_\_\_

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

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