|  |  |
| --- | --- |
| Royal College of Occupational Therapists Library**PHOTOCOPY ORDER FORM**Overseas members |  |

The RCOT Library can supply photocopied articles for a ***non-commercial purpose***, ***private study or research*** up to a maximum of six at any one time. The charge is £5.00 per article. ***Please note, due to copyright restrictions, only one article can be photocopied from any one issue***

*Our service standard is to post out photocopies within seven working days of receipt. A fast track fax service is available at £9.00 per article. Requests for the fast track service will be dispatched the same day providing the request and payment are received by 4pm. Requests received after 4pm will be sent the next working day***.**

**Copyright declaration (required by law)**

Please supply me with a copy/copies of the articles/extracts listed below which are required by me for the purposes of non-commercial research or private study.

1. I declare that:
2. I have not previously been supplied with a copy of the same material by you or any other librarian;
3. I will not use the copy except for research *for a non-commercial purpose* or private study and will not supply the copy to any other person; and
4. to the best of my knowledge, no other person with whom I work or study has made or intends to make, at or about the same time as this request, a request for substantially the same material for substantially the same purpose.

I understand that if the declaration is false in a material particular, the copy supplied to me by you will be an infringing copy, and that I shall be liable for infringement of copyright as if I had made the copy myself.

Date……………………………………………….

NAME……………………………………………..

ADDRESS………………………………………………………………………………………………

……………………………………………………………………………………………………………

This must be the name and details of the person making the request.

**RCOT Library - Privacy Statement**

All personal data collected on this form will only be used for the purposes of this form and will be retained securely by RCOT Library in line with UKGDPR. This data will not be shared with third parties.

Further information on the RCOT Privacy Policy can be found at: <https://www.rcot.co.uk/privacy-policy>

|  |  |  |  |
| --- | --- | --- | --- |
| **Journal Title** |  | | |
| **Year:** | **Vol:** | **Issue:** | **Pages:** |
| **Author(s):** |  | | |
| **Title** |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Journal Title** |  | | |
| **Year:** | **Vol:** | **Issue:** | **Pages:** |
| **Author(s):** |  | | |
| **Title** |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Journal Title** |  | | |
| **Year:** | **Vol:** | **Issue:** | **Pages:** |
| **Author(s):** |  | | |
| **Title** |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Journal Title** |  | | |
| **Year:** | **Vol:** | **Issue:** | **Pages:** |
| **Author(s):** |  | | |
| **Title** |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Journal Title** |  | | |
| **Year:** | **Vol:** | **Issue:** | **Pages:** |
| **Author(s):** |  | | |
| **Title** |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Journal Title** |  | | |
| **Year:** | **Vol:** | **Issue:** | **Pages:** |
| **Author(s):** |  | | |
| **Title** |  | | |

**Address to return a form by post:**

RCOT Library and Information Services, 106-114 Borough High Street, London, SE1 1LB

**Email to return a scanned form:** [library@rcot.co.uk](mailto:library@cot.co.uk)

**Office use only:**

Date in: Date out: Receipt No:

# **Cheque payment:** Please make your cheque payable to: Royal College of Occupational Therapists

**Credit card payment:** This payment section can be completed for postal requests, however, if you are emailing a scanned photocopy request, please complete the order form above and return it. Then telephone the library on +44 (0)203-141-4616 to provide your credit/ debit card details

**This is in accordance with the Payment Card Industry Data Security Standards (PCI – DSS Requirement 3 / PCI DSS Version 3.2.1)**

|  |  |  |
| --- | --- | --- |
| **Total number of photocopies requested @ £5.00 each** | BAOT Number: | |
| **Total remittance £:** | **DATE:** | |
| **Your fax number (including dialling codes):** |  | |
| **NAME:** | | | |
| **ADDRESS:** | | | |
|  | | | |
|  | | | |
|  | | | |
| **Tel:** | | |
| **Email:** | | |
| **PAYMENT BY CREDIT CARD: Switch/Access/Visa/MasterCard/Debit \* please delete** | | | |
| **CARD NUMBER:** | | **Switch Issue Number:** | |
| **Valid from date / /** | | **Expiry date: */ /*** | |
| **Signature:** | | **Print Name:** | |
| **Card security code: (This is the last 3 digits on the back of the card)** | | | |