

BISHOP'S CASTLE HERITAGE RESOURCE CENTRE, OBJECT ENTRY FORM

Bishop's Castle Heritage Resource Centre, Chapel Yard, Bishop's Castle SY9 5DE		Form No: 0001
Received from: Address:	Deposited on behalf of (if different): Address:	
Tel No:	Tel No:	
DESCRIPTION OF OBJECT/S:		

DEPOSIT PROCEDURES: (Initial & date each procedure when completed)	INITIALS	DATE
Inventory checked		
Items checked for contamination		
Deposit Agreement completed		
Quarantine		
Freezing (if necessary)		

COPIES & ACCESS: (Tick Yes or No for each type of copy that may be taken)	YES	NO
Private (individual) study & research – single copy		
Production of educational materials		
Broadcasting		
Temporary exhibition		
Publication		

LIMITED ACCESS SCHEDULE: (Tick Yes or No)	YES	NO
Limited Access Schedule under Condition 13 attached		

I AGREE TO DEPOSIT THE OBJECT/S DESCRIBED ABOVE. I HAVE COMPLETED A DEPOSIT AGREEMENT AND READ & UNDERSTOOD THE TERMS OF ACCEPTANCE	
Depositor's Signatory	Date

RECEIPT OF THE OBJECT/S DESCRIBED ABOVE IS HEREBY ACKNOWLEDGED	
BCHRC Signatory	Date