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PLEASE WRITE IN BLOCK CAPITALS

Form to register for borrowing audio-video materials

2018-2019 ACADEMIC YEAR

I, the undersigned: (surname)	(name)
Student Number	, in Padova until (date)
	Ask
to be given permission to borrow audio-video materials from the Mediateca of the Language Centre for language learning purposes, with relation to the following languages:	
I, the undersigned, declare that I am Protection of Author's Rights, G.U n.68), in particular of Art. 171-te	n aware of the Italian legislation on copyright (Law 22 April 1941 n.633 – J. n. 166 of 16 July 1941 – updated by legislative decree of 9 April 2003, or which forbids the duplication, reproduction, public broadcasting and ls, and therefore will abide by said law, accepting all responsibility if this
Signature	
Padova, (today's date)	······································
Part to be compiled by Mediateca	
CONTACT DETAILS	
Address in Italy:	
Street name and house number	
City (if not Padova)	
Telephone/mobile no.	
E-mail address	