

Contra Costa JCC
MILLMAN ADULT DAY PROGRAM

**DEMENTIA CAREGIVERS
RESOURCE LIBRARY**

CHECK OUT FORM

CHECK-OUT DATE: _____

DUE DATE: _____

RETURN DATE: _____

BORROWER INFORMATION:

Name: _____

Address: _____ **City:** _____ **Zip:** _____

Home Phone: _____ **Cell Phone:** _____

E-mail address: _____

Signature: _____

BOOKS or DVD'S BORROWING TODAY:

Limit: 1 Book & 1 DVD

TITLE OF BOOK: _____

TITLE OF DVD: _____

If a book or DVD is lost or damaged, the borrower is responsible for replacing the item at full replacement cost.

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