

# 3D Printing Request Form

Name: \_\_\_\_\_

Library Card #: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Object Description: \_\_\_\_\_

\_\_\_\_\_

## Filament Color Choices:

- |                                 |   |                                     |
|---------------------------------|---|-------------------------------------|
| <input type="radio"/> Red       | <input type="radio"/> Black             | Others, as they<br>become available |
| <input type="radio"/> Orange    | <input type="radio"/> Gray              |                                     |
| <input type="radio"/> Yellow    | <input type="radio"/> White             | <input type="radio"/> _____         |
| <input type="radio"/> Green     | <input type="radio"/> Purple            | <input type="radio"/> _____         |
| <input type="radio"/> Blue      | <input type="radio"/> Translucent Clear | <input type="radio"/> _____         |
| <input type="radio"/> Dark Blue | <input type="radio"/> Translucent       |                                     |
| <input type="radio"/> Brown     | <input type="radio"/> Purple            |                                     |

Please visit the [www.Makerbot.com](http://www.Makerbot.com) website for examples of filament color.

## Filament Type:

- PLA

Estimated Height: \_\_\_\_\_

Estimated Printing Price (Based on Print time): \_\_\_\_\_

Filled out by staff

By filling out and signing this form, parent or guardian for patrons under the age of 16, the requester accepts the Policy and Procedure for 3D printing at Rockingham County Public Libraries. The patron, parent or guardian agrees to pay all costs for the print job.

\_\_\_\_\_  
Requestor's Signature

\_\_\_\_\_  
Date of Request

\_\_\_\_\_  
Parent or Guardians Signature, if applicable

\_\_\_\_\_  
Date of Request