

Digitization station booking request

Name

First

Last

Pronouns

Ex: She/her, he/him, they/them, she/they, he/they

I have had an orientation to the digitization station.

? I have had an orientation to the digitization station.

All users need an orientation with staff before booking. If you haven't had one yet, please [request an orientation session](#) and read more about the [digitization station](#).

Email

Phone number

Library card number

City Library cards begin with 23287

Preferred booking dates

Please check the [booking calendar](#) to ensure your preferred date and time are available.

Preferred booking date — Option 1

Time - your first choice - Select - ?

Preferred booking date — Option 2

Time - your second choice - Select - ?

How many hours would you like to book the station?

Bookings are for a maximum of three hours per person, per day.

What formats are you interested in digitizing?

? Scanning photos

Up to 8x11"

? Scanning photo negatives

? Scanning slides

35mm

? VHS video

Region 1/NTSC only

? VHS-C video

? Camcorder tapes: 8mm

Region 1/NTSC only (no PAL/Seacam)

? Camcorder tapes: MiniDV

Region 1/NTSC only (no PAL/Seacam)

? Film

Super 8/8mm

? Vinyl

33/45/78rpm

? Audio cassette tapes

? Audio CDs

? DVDs

Please select all that apply.

Use agreement

We ask that you use headphones for audio work, as sound from the computer speakers carries outside the walls of the digitization station even when turned to low. Please note that we are not able to offer PAL or SECAM VHS video tape digitization.

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Use agreement verified

? I am comfortable using the equipment in the digitization station on my own (without staff assistance) and I will allow time in my booking request to familiarize myself with the station.

? I understand that this booking is a request, and that the booking time is not reserved for me until I receive confirmation from City Library staff.

Freedom of Information and Protection of Privacy Act Notice

The library is collecting your personal information in accordance with Section 26(c) of the Freedom of Information and Protection of Privacy Act. If you have any questions, please contact us at 120 14th St. West, North Vancouver, BC, V7M 1N9, or [604-998-3495](tel:604-998-3495) or privacy@nvcl.ca.

Security Check