



Caribbean Regional ISBN Agency  
 (CARICOM)  
 Caribbean Community Secretariat  
 P.O. Box 10827  
 Turkeyen  
 Greater Georgetown  
 Guyana

## REQUEST FOR ISBN

**PLEASE USE BLOCK CAPITALS.**

**DO NOT REMIT ANY FEES UNTIL YOU HAVE BEEN INVOICED.**

Submit this application to the Regional/National Agency at least ten (10) working days prior to the intended date of publication.

<b>Title:</b>					
<b>Author:</b>					
<b>Name of Series (if any):</b>					
<b>Year of publication:</b>			<b>Number of pages:</b>		
<b>Number of volumes (if applicable):</b>			<b>Number of copies to be printed:</b>		
<b>Edition:</b> <input type="checkbox"/> New		<input type="checkbox"/> Revised	<input type="checkbox"/> Reprint (please state original date of publication):		
<b>Binding/Format:</b> <input type="checkbox"/> Hardcover		<input type="checkbox"/> Paperback	<input type="checkbox"/> CD	<input type="checkbox"/> E-book	<input type="checkbox"/> DVD
<input type="checkbox"/> Kindle	<input type="checkbox"/> Braille	<input type="checkbox"/> Jacketed	<input type="checkbox"/> Kobo	<input type="checkbox"/> Box set	
<b>Publisher's Name and Address:</b>					
<b>Tel</b> (Include country code):			<b>Mobile</b> (Include country code):		
<b>Fax</b> (Include country code):			<b>Email:</b>		
<b>Website:</b>					
<b>Signature of Publisher:</b>				<b>Date</b> (yyyy/mm/dd):	

### FOR AGENCY USE ONLY

<b>Amount paid:</b>		<input type="checkbox"/> Cash	<input type="checkbox"/> Cheque
<b>Cheque Information</b> (Financial Institution, Number and Date):			
<b>Fees paid for:</b> <input type="checkbox"/> Registration		<input type="checkbox"/> Processing	

<b>ISBN assigned:</b>	
<b>Date assigned:</b>	<b>Assigning Officer:</b>

Revised October 2019