



## Library Membership Form

Please complete using BLOCK letters

Mr  Mrs  Ms  Miss  Other

Name(s): \_\_\_\_\_ Date of birth: \_\_\_\_\_

Family name: \_\_\_\_\_

Street address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Language spoken at home: \_\_\_\_\_

Email: \_\_\_\_\_

Notify by:  Mail  Email  SMS Library newsletter:  Yes  No

Tick if your postal address is the same as your street address

Postal address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

### Additional applicants under 16

Family name	Names	DOB	Card No. (Staff Only)

## Disclaimer

### Applicant 16 years and over

I acknowledge and agree that I am responsible for meeting Fairfield City Open Libraries policies. I understand that I am responsible for items lost or damaged and for reimbursing any fees incurred. I declare all details provided by me are true and correct and I agree to notify the library of any changes.

Full name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

### Parent/ legal guardian for applicant/s under 16

I acknowledge and agree that I am responsible for my child/ren's use of the library and its resources, including the internet. I understand that I am responsible for items lost or damaged and fees incurred by my child/ren. I declare all details provided by me are true and correct, and I agree to notify the library of any changes.

Full name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

### Privacy Statement

Applying for library membership requires you to provide personal information to process your application. Your personal information is only used within Fairfield City Council for the sole purpose of managing your library membership, unless there is a need to use or disclose your personal information for legal requirements. You have the right at any time to request access to and/or correct any personal details on your account held by the library.

### STAFF USE ONLY

BON  FLD  SMI  WHI  WPK

Card No: \_\_\_\_\_ PIN: \_\_\_\_\_

ID: \_\_\_\_\_ Staff name: \_\_\_\_\_