



Membership Application Camden Council Library Service

Title eg Mrs	First Name	Date of Birth
	Family Name	Gender eg M/F
Home Phone	Mobile Phone	Email
Password (PIN) – used to access your borrower record & to use Public Access Computers in the library		PIN <i>PIN must have a combination of letters and numbers (at least one of each) and be at least 7 characters long</i>
<input type="checkbox"/> Tick here not to receive Library eNewsletter about events and library news		Please send my library notices by: <input type="checkbox"/> Email <input type="checkbox"/> SMS <input type="checkbox"/> Post

Address

No. & Street	
Suburb/Town	Post Code
Mailing Address – <i>if different to above address</i>	
Street	
Suburb/Town	Post Code
Local Government Area <input type="checkbox"/> Camden <input type="checkbox"/> Campbelltown <input type="checkbox"/> Wollondilly <input type="checkbox"/> Liverpool <input type="checkbox"/> Other	

Conditions of membership for Camden Council Library Services

By joining the library I agree to:

1. Pay for the loss of, or damage to, any library materials
2. Pay any fees incurred
3. Notify the Library if my card is lost or stolen. I will remain responsible for my card and its use until this is done
4. Have my card with me to access library services
5. Notify the library of any change of address, name or contact details
6. Follow the rules and regulations of the library
7. Comply with any reasonable request made by library staff
8. Parents and guardians have responsibility for guiding the reading, listening and viewing choices of their children (members under 16 years), including the use of the internet

Declaration

I certify that the information I have given is correct. I agree to the conditions of membership and accept responsibility for services accessed using my membership card.

Name _____ Signature _____ Date _____

Parent or Guardian Declaration – required for members under 16 years

For the people under 16 years of age listed above/overleaf, I approve my child's application for membership, including access to the internet if indicated by provision of a password. I will ensure my child complies with the conditions of membership above.

Name (***Please Print Full Name***) _____ Signature _____ Date _____

OFFICE USE ONLY	Address ID & Medicare Card for Dependents sighted:	<input type="checkbox"/>
Card No:	Staff Initials & Date:	

Additional Household Members

**Please write "As Above" for any details
which are the same as the first membership application.**

Title eg Miss	First Name	Family Name
	Date of Birth	Gender eg M
Mobile Phone		Email
Password (PIN) *		<i>PIN must have a combination of letters and numbers (at least one of each) and be at least 7 characters long</i>
Please send my library notices by <input type="checkbox"/> Email <input type="checkbox"/> SMS <input type="checkbox"/> Post		Office Use Only Card No:

Title eg Miss	First Name	Family Name
	Date of Birth	Gender eg M
Mobile Phone		Email
Password (PIN)*		<i>PIN must have a combination of letters and numbers (at least one of each) and be at least 7 characters long</i>
Please send my library notices by <input type="checkbox"/> Email <input type="checkbox"/> SMS <input type="checkbox"/> Post		Office Use Only Card No:

Title eg Miss	First Name	Family Name
	Date of Birth	Gender eg M
Mobile Phone		Email
Password (PIN)*		<i>PIN must have a combination of letters and numbers (at least one of each) and be at least 7 characters long</i>
Please send my library notices by <input type="checkbox"/> Email <input type="checkbox"/> SMS <input type="checkbox"/> Post		Office Use Only Card No:

Title eg Miss	First Name	Family Name
	Date of Birth	Gender eg M
Mobile Phone		Email
Password (PIN)*		<i>PIN must have a combination of letters and numbers (at least one of each) and be at least 7 characters long</i>
Please send my library notices by <input type="checkbox"/> Email <input type="checkbox"/> SMS <input type="checkbox"/> Post		Office Use Only Card No:

**Families can use the same password/PIN on each borrower record, if desired. The provision of a password/PIN indicates permission to use the library's computers which access the internet.*