	Library Membership Application
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Class of Membership	
Adult Membership	Institution
Junior Membership (Under	16 years of age)
Name of Applicant	
🗌 Mr 🗌 Mrs 🗌 Miss	•
🗌 Ms' 🗌 Master	
Mailing Address	
Residential Address	•••••••
As Above	
Telephone Number	Home:
	E-mail Address:
I hereby apply for enrolment as a	member of the above Library. I agree to conform to the rules of the
Library and to pay any fine or make to the regulations re	good any loss or damage with which I may justly be charged. I adhere egarding the 'Internet Use Policy'& 'Behaviour Policy'.
Signature:	(Applicant)
Occupation:	
Employer's Name:	
Employers Address:	
Work Phone Number:	
Junior Membership's Only	
If the applicant is under the age of for this application. I, being the p	5 16 years, the name and signature of a parent or guardian is required parent/guardian of the above mentioned minor, do hereby certify that I y Internet Use', 'Behaviour Policy' and 'Computer Policies', and agree tions as specified.
Signature:	
Parent/Guardian Name:	(Parent/Guardian)
	Data of Pirth. / /
<u>School:</u>	<b>Date of Birth:</b> / /
Institution Membership's O	
Authorised Persons	then please provide the names of all authorised persons.
Please be Advised: Parents and guard Uncensored'. It is not possible for vast amount of information accessibl Internet sessions. As with the use o	ians are advised that material available on the 'Internet is the Longreach Shire Council to successfully control or monitor the e and Library Staff are not responsible for supervising individual f other Library materials and resources, we suggest that parents take children's use of the 'Internet', if you have any concerns about the
Restrictions on any Material.	Restrictions. As a borrower, you are required to comply with any Copyright
I have verified the person whose sig mentioned minor.	nature appears above as being the parent/guardian of the above
	Yes No
	Library Administrator (Signature)

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