

Library Membership Application Form

First Name(s)

Surname

Date of Birth

Postal address

Postcode

Council Area

Knox ☐ Maroondah ☐ Yarra Ranges ☐ Other ☐

Phone

Email

Password

(Your password must be a minimum of 6 characters long. It must contain uppercase & lowercase characters and at least one number.)

- ☐ I am 18 years plus and agree to the terms and conditions of library membership.
(If you are under 18, please ask your parent/guardian to complete the form overleaf)

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Library Membership Application Form



To be completed by the parent/guardian for applicants under 18 years of age.

- ☐ I am the legal guardian of this child and will act as guarantor of this library membership, including agreeing to take responsibility for all items borrowed. I accept responsibility for the selection and use of library materials including internet access/WiFi services.

Signature _____

Parent/Guardian's Name _____

Parent/Guardian's Date of Birth _____

Address (if different from the applicant) _____

Postcode _____

Phone _____

Email _____

- ☐ Sign me up as well and mail my library card to me.

Please hand this form to a library staff member to complete your membership.

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