

Coventry Libraries and Information Service Membership Form for Children and Young People (Age 0-15)

Joining your local library is easy. To join the library all you need to do is print this form, fill in your details and take it to your nearest library.

Do not forget you need to get your parent/carer or guardian to sign the bottom of the form.

| Child details: | |
|---|--|
| Child 1: | Surnama / Last Name) |
| First names: | • |
| Date of Birth: | Male Female |
| Child 2: | Currage of Last Names |
| | Surname/Last Name: |
| Date of Birth: | Male Female |
| Child 3: | |
| First names: | · |
| Date of Birth: | Male Female |
| Address: | |
| | Postcode: |
| E-mail address (optional): | |
| Telephone (optional): | |
| Address (If different): | Surname/Last Name: Postcode: |
| E-mail address (optional): | Telephone (optional): |
| | the above child/children. I confirm that the child's/children's details are sponsible for all library items borrowed and used by the named and any and/or late return. |
| Signature: | Date: |
| Data Protection Act 1988 the information will not be passed on to any third particle. | ation you provide will enable you to be member of the Library Service and ty. |
| For Staff use only: | |
| Ticket number: | |