



Membership Application

Kia ora. Welcome to Upper Hutt City Library.
To apply for a Library card, please complete this form
and supply proof of identification and current address.

PLEASE PRINT CLEARLY



Last Name:

First Name: Middle Name:

PIN/Password: (for online access)

Date of Birth: Male: Female: (please tick one)

Where borrower is under 16:

Parent/guardian: Date of Birth:

School (if applicable):..... Room: Year:

Phone (Home): (Work/Mobile):

Address:

..... Post Code:

Postal/Guardian Address:
(if different from above)

..... Post Code:

Email address:

I wish to receive overdue, billing and request notices via email: Yes No

I would like to subscribe to the Library's electronic newsletter: Yes No

Are you **NEW** to New Zealand? Yes No

Would you like to be contacted by Settlement Support? Yes No

In signing this form I agree to the following:

- To return all items in good condition and on time.
- To pay any overdue, damaged or lost charges.
- To notify the Library of any change of address, phone number or email address.
- To notify the Library immediately if this card is lost or stolen.
- Your personal information will not be shared with organisations outside Upper Hutt City Council, but it may be provided to a debt collection agency who act on behalf of Upper Hutt City Library in the event attempts to settle outstanding charges are unsuccessful. An additional collection fee may apply.

Signature:

You may access and update this information at any time (in accordance with the Privacy Act 1993.)

For Office Use Only:						BIEB <input type="checkbox"/>
A	U16	AR	JR	CAS	G	Rec:
NRES	Card Number:					E <input type="checkbox"/>
Staff Name:					Date:	CL <input type="checkbox"/>
						B <input type="checkbox"/>