



# HURUNUI DISTRICT LIBRARIES APPLICATION FOR MEMBERSHIP

## BORROWER DETAILS

Family name: \_\_\_\_\_  
First names: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ (dd/mm/yyyy)  
Address: \_\_\_\_\_  
Area: \_\_\_\_\_ Postcode: \_\_\_\_\_  
Postal Address: \_\_\_\_\_  
(if different from above)  
Area: \_\_\_\_\_ Postcode: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_  
**Preferred means of contact phone or email** (please circle. NB email not currently being used)

**CONTACT PERSON** (we need the contact details of a friend, relative or employer who can pass on mail if you move, or provide us with your new contact details)

First Name: \_\_\_\_\_  
Family Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

**PARENT / LEGAL GUARDIAN** (if applicant is under 16)

Family Name: \_\_\_\_\_  
First Name: \_\_\_\_\_  
Library Number: \_\_\_\_\_  
(if a member)  
Postal Address: \_\_\_\_\_  
Area: \_\_\_\_\_ Postcode: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_  
**Preferred means of contact phone or email** (please circle. NB email not currently being used)

If an **AREA SCHOOL MEMBER**

Room No: \_\_\_\_\_  
Class: \_\_\_\_\_  
Teacher: \_\_\_\_\_

### OFFICE USE ONLY:

Library: \_\_\_\_\_ Membership Number \_\_\_\_\_  
Proof of ID 1. \_\_\_\_\_ Exp. \_\_\_\_\_  
2. \_\_\_\_\_ Exp. \_\_\_\_\_  
Proof of address: \_\_\_\_\_  
Category: \_\_\_\_\_ Enrolled by: \_\_\_\_\_ Date: \_\_\_\_\_

