

Public Library Membership Application

Personal Information	
Surname	
Given Names	
Title (Mr, Mrs, Miss, Other)	
Date of Birth	
Residential Address	
Postal Address	
Home Phone	
Mobile	
Email Address	
Library Card Barcode	
I apply for Membership to the Shire of Koorda Public Library. All materials borrowed under my name shall receive proper care while in my possession. I understand that materials borrowed by members under the age of 16 (if applicable) are the responsibility of the parent and guardian. All damages or loss to the items borrowed under my name will be solely my responsibility.	
Applicants Under 16 years of age	
Surname	
Given Names	
Date of Birth	
Surname	
Given Names	
Date of Birth	
Surname	
Given Names	V
Date of Birth	