

Welcome to Cambridgeshire Libraries

Please complete this application form to join your child as a member of Cambridgeshire libraries. Once completed please return this form either to your child's school or hand it in at St Neots Library.

Child's Details

First name of child Surname of child.....

Address

..... Postcode

Child's Date of Birth

Guarantor Details

(Must be over 18 years old and willing to accept responsibility for all items borrowed by this child)

First name of parent/guardian

Surname of parent/guardian

Address

..... Postcode

Email address

Telephone Number

By giving us an email address you will receive email notifications of reservations and overdue notices.

Information on this form will be securely stored on our database and may be disclosed to third parties for the recovery of non-returned items.

I agree to follow all of the library rules, regulations and byelaws and computer use policy.

Signature

Date

Additional Children's Details

(If you wish to join any additional children please fill in this section below)

First name of child Surname of child.....

Address (if different from above
.....

Postcode Child's Date of Birth