

Invercargill City Libraries Registration Application

Adult 18+ Child Temporary Other

Mr Mrs Miss Ms

First Name (s) Preferred Name
Last Name Address
Birthdate Town/City
Email Postcode
Ethnicity Phone
PIN (for online account access) Cellphone

Alternate Contact (someone who does not live at your address whom we may contact if necessary)

Name Phone

Guardian/Address 3 (the guardian is the guarantor who will need to present photo ID and address verification)

Name Phone
Address Cellphone
Town/City Postcode

Would you like to receive email pre-alerts? Yes Pre-alerts let you know when items are nearly due

Would you like to receive our e-newsletter? Yes

- I verify that the information I have given is correct
- I agree to the conditions as stated in the Conditions of Use and have read the Privacy Act Statement.
- I assume financial responsibility for all charges and materials borrowed on this card
- I authorise Invercargill City Libraries to make information about me available to other units of the Council and/or debt collection agency for the recovery of outstanding items, and/or monies owed.

Name Signature
Date

STAFF USE ONLY

Barcode No.
Staff Name

ID Provided (please tick two)

NZ Drivers License Passport R18 Card
Address ID Other