

PLEASE PRINT CLEARLY AND SIGN THE BOTTOM OF THIS FORM

Last Name: _____

First Name: _____ Middle Name: _____

Preferred Name (if different from above): _____

Date of Birth: ____/____/____

Address (Residential): _____

Postcode: _____

Phone: _____

Email: _____

My Local Council: Goulburn Mulwaree Council Upper Lachlan Shire Council Other

<p>I would like my Reservations & Reminders sent by: <i>(please choose one)</i></p> <p><input type="radio"/> Text message (SMS)</p> <p><input type="radio"/> Email</p>	<p>I would like my Due Date Slips by: <i>(please choose one)</i></p> <p><input type="radio"/> Printed receipt</p> <p><input type="radio"/> Text message (SMS)</p> <p><input type="radio"/> Email</p>
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Terms and Conditions:

- I agree to abide by the terms and conditions outlined in the Membership and Access Policy. For more detail visit gmlib.co/memberpolicy or ask staff for a copy. Terms and conditions include:
 - I agree to abide by the Library Code of Conduct.
 - I agree to pay the applicable fees for any items lost or damaged that have been issued to me or for minors for whom I have signed as guarantor.
 - I agree to present a valid library card to conduct Library transactions or use Library facilities.
 - I agree to give notice of any change of address, email, or phone number.
 - I acknowledge that the Library does not monitor and has no control over information available online or in published works and cannot be held responsible for its content.
 - I acknowledge that monitoring or restricting access to collection materials and the internet by children aged under 16 years of age is the responsibility of the parent or legal guardian.

By signing below, I acknowledge that I have read these terms and conditions and agree to abide by them.

Signature: _____

Date: ____/____/____

OFFICE USE ONLY																							
ID cited: _____ Staff Member: _____	GMC Barcode No. _____ or ULSC Barcode No. _____																						
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Parent or Guardian to complete details below for each family member under 16 years of age

As the parent or guardian of the children listed below, I take responsibility for any items borrowed or fees incurred by them and agree to that I am responsible for monitoring their reading choices and internet use.

Signature of parent or guardian: _____ Date: ____/____/____

Print Name of Parent or Guardian: _____

1. Last Name: _____ First Name: _____ Middle Name: _____

Date of Birth: ____/____/____

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2. Last Name: _____ First Name: _____ Middle Name: _____

Date of Birth: ____/____/____

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3. Last Name: _____ First Name: _____ Middle Name: _____

Date of Birth: ____/____/____

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4. Last Name: _____ First Name: _____ Middle Name: _____

Date of Birth: ____/____/____

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Council collects personal information only for a lawful purpose that is directly related to Council's functions and activities. Council is required under the Privacy & Personal Information Protection Act 1998 (PPIPA) to collect, maintain & use your personal information in accordance with the Privacy Principles & other relevant requirements of the PPIPA. For further information or clarification please contact council's Privacy Officer or refer to council's Privacy Management Policy at <https://www.goulburn.nsw.gov.au/files/sharedassets/public/policies/june-2022/privacy-management-policy.pdf>