

The information you provide will enable us to manage the library service, which you are applying to use. It will be treated confidentially subject to current Data Protection legislation.

Surname / Family Name:		Title:	
Current Address:			
Tel No: (Postcode: Mobile Tel:	
E-Mail Address:		WIODIIC TCI.	
Date of Birth:	ice (4 numbers):		
I apply for membership of Do materials and access various	ncaster Library and Informati	ion Services to enable m	ne to borrow
I undertake to comply with the E	Byelaws and Rules and Regulation	ons at any time in force.	Yes ☐ No: ☐
Do you agree to use the Interne	et service in accordance with the	e Council's Internet Public	Use Policy?
(A copy of the policy is available for you to read).			Yes: ☐ No: ☐
Are you happy for Doncaster Lik	oraries to email you with informa	ation about library activities	s, events, and offers?
			Yes: ☐ No: ☐
Tell us more about yourself.			
This section is optional, but the	information that you provide will	Il help us to improve the s	service you receive.
Are you:		Mal	e: D Female: D
Do you consider yourself to hav	re a disability: No 🔲 Yes		
Would you describe your ethnic	corigin as:		
White:	British Irish Polish	Other 🗆	
Asian or Asian British:	Pakistani 🗖 Bangladeshi 🛭	☐ Indian ☐ Chines	se 🗖
Black or Black British:	African Caribbean		
If none of the above accurately	describes your ethnic backgrou	und, please write in your o	wn words:
Authorisation for Children's I	Memhershin		
If you are under 16 years old pl	ease ask your parent, guardian contact for the above named ch		section:
My Name:		Parent 🗖 Gua	rdian:
My Address (if different from ab	pove)		
Tel. No: ()	Mobile	e Tel:	
	erson using the Internet service		
	e is available for age 7 and over		Yes: No: