

Document Name:

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Date of Issue:

Next Review Due:

## Application for Adult Membership Weipa Hibberd Library

1) Member Details									
Surname						First Name			
Postal Address	Weip	ра	QLD		4874				
Residential Address	Weip	oa	QLD		4874				
Telephone	(h)				(m)			(w)	
Automatic notices will be sent to the email address below for overdue items and reserved items.									
Email Address									
2) Identification									
Drivers Licence No or Medicare No									
3) Declaration of Applicant									
□ I agree to abide by all the published policies of the library service, and confirm that I am aware the policies and regulation are available for inspection at the library upon request. These policies may include, but are not limited to: internet acceptable us policies, loan policies, behaviour policies and lost/damaged items policies.									
☐ The person listed above will be able to borrow materials from the network of Rural Libraries Queensland. By signing, you agree to be responsible for all conditions of borrowing, including the payments of any charges connected with overdue, lost or damaged materials, and for the suitability of material accessed within the library.									
☐ I, the applicant, declare that the above information is correct in all respects at the time of lodgement of this application. Should any of the details given in relation to this application be changed in the future, I understand it is my responsibility to advise the Weipa Hibberd Library of these changes.									
Applicant Signature								Date	

Doc No: FRM-000

Authorised By: Superintendent