



1. Member Details			
Surname		Given names	
Female	<input type="checkbox"/>	Male	<input type="checkbox"/>
Postal address			
Residential address while staying in Weipa			
WEIPA		QLD	4874
Phone numbers	Home	Mobile	
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 Card No.	

3. Declaration of Applicant	
<input type="checkbox"/> I agree to abide by all the published policies of the library service, and confirm that I am aware the policies and regulations are available for inspection at the library upon request. These policies may include, but are not limited to: internet acceptable use policies, loan policies, behaviour policies and lost/damaged items policies.	
<input type="checkbox"/> 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 materials accessed within the library.	
<input type="checkbox"/> 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's Signature	Date

OFFICE USE ONLY		
Card no.	Date	Initial