



Library Membership Registration Form

First Name: Family name:

Title: Job Title:

Ward/Unit/Dept.:

Ext or Bleep No.: Mobile No.:

Work / student email:

Home Address:

Post code: Home Tel. No.:

Personal email:

Permanent Contract? Yes / No If no, please state your contract / placement end date:

I am eligible for additional assistance with library services
(e.g. large print and extended loan periods, please ask library staff for details)

I prefer correspondence from the library (e.g. reminder & reservation notices) to be sent by:
SELECT 1 OPTION ONLY work / student email Personal email

Please tick box if you do **NOT** wish to receive library service announcements / news
(This will not stop you receiving your item due / overdue notices)

I understand that the data and contact information I provide will be stored on the library system, treated as confidential and only available to staff at libraries that are part of the BASE Library consortium (including NHS and partner organisations external to the NHS).
I agree to abide by BASE Library and local library terms and conditions (see www.base-library.nhs.uk or **Your BASE Library Membership: Important Information** leaflet available in the library) and the local IT policy. Please note CCTV may be in operation at the library to ensure safety and provide a deterrent against misuse.
I have read and agree to the statements above.

Signature: _____ Date: _____

Library staff use only
Library card number: