

## Membership Application for Resource Centre

Surname: \_\_\_\_\_

First name: \_\_\_\_\_

Course: \_\_\_\_\_ Teacher: \_\_\_\_\_

Address (h): \_\_\_\_\_

Town / suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone (h): \_\_\_\_\_ Mobile: \_\_\_\_\_

E-mail: \_\_\_\_\_

Occupation: \_\_\_\_\_

### Teachers only

School/Institution: \_\_\_\_\_

Address (w): \_\_\_\_\_

Town / suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone (w): \_\_\_\_\_ Fax (w): \_\_\_\_\_

E-mail: \_\_\_\_\_

I agree with borrowing conditions as follows:

- All items borrowed will be returned by the due date
- Renewals can be made by phone or in person
- Charges apply for lost or damaged items

\_\_\_\_\_  
signature

\_\_\_\_\_  
date

Office Use Only:

Membership No. (bar code no.) \_\_\_\_\_