



## The Deaf Society of New South Wales Library Membership Application

To join the Deaf Society of NSW (DSNSW) library, please print this form, fill in the details and bring it to the DSNSW office with photo identification (unless you have already provided photo ID to the Deaf Society).

Make sure you read the DSNSW Library Lending Policy so you know what you are agreeing to. (For a copy of the policy, follow the link from [www.deafsocietynsw.org.au/information/library](http://www.deafsocietynsw.org.au/information/library) or email us at [library@deafsociety.com](mailto:library@deafsociety.com)).

Title: \_\_\_\_\_

Family Name: \_\_\_\_\_

Personal Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

Post Code: \_\_\_\_\_

Preferred phone number: \_\_\_\_\_

Alternate phone number: \_\_\_\_\_

***I agree to follow the DSNSW Library Lending Policy. I agree to return borrowed material by the due date or the recall date. I also agree to pay upon request, any fines for loss, damage or late return of materials borrowed under my name. I will notify DSNSW if I change my address.***

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Privacy Statement: The DSNSW acknowledges and respects the privacy of individuals. Some information collected and held by DSNSW for educational, statistical and financial purposes may constitute "personal information" as defined by relevant Privacy legislation. DSNSW collects this information from you for the purpose of verification of identity and correspondence. The various DSNSW departments who carry out these functions may have access to some or all of the information that you provide to us. You have the right to request and view your personal information.