



Shire of Halls Creek Public Library.

PO BOX 21, HALLS CREEK WA 6770
PHONE: 08 9168 6007 FAX: 08 9168 6235
ABN: 58 251 691 051

LIBRARY MEMBERSHIP APPLICATION

PLEASE NOTE;

A refundable membership bond is required from all applicants.

Are you already a member of another Western Australian Library?

Yes

No

Residential Status;
(proof of residence is required)

Permanent,
Long-term

 P

Short-term,
Temporary

 S

Traveller,
Tourist

 T

Where do you currently reside?

In town

 L

In a remote community, station or mine within the Shire boundaries

 R

Elsewhere
in WA

 E

Interstate

 I

Overseas

 O

Type of Membership;
(Juniors must be signed up by a parent or guardian)

Adult
(18yrs+)

 A

Young Adult
(13 – 18yrs)

 Y

Junior
(0 – 12yrs)

 J

Family

 F

Corporate,
Business

 C

Shire Staff

 S

Members Name;

Date of Birth;

Residential Address;

Postal Address;

Contact Phone;

Work Phone;

Email;

Primary Identification;

MDL

Passport

Birth Cert.

Id #;

Alternative Contact;

Name;

Phone;

Members Declaration;

I accept all responsibility for all items loaned by myself or through the use of my membership card and understand that I may be charged a fee for any late returned, lost, stolen or damaged items.

I also understand that the Shire of Halls Creek may cancel or suspend my membership at any time if breaches are found to warrant this action.

Signature;

Date;

OFFICE USE

Memb. Card #

Staff Initial;

Deposit Paid;

 YES NO

Deposit Returned;

 YES NO

Date Returned

Payment Method

 CASH CHQ EFT

Receipt #;

I, the member above, acknowledge that I have cancelled my membership, returned my card and have received my deposit back in full;

Receipt #;