SHEFFIELD CITY ARCHIVES AND LOCAL STUDIES LIBRARY

APPLICATION FOR A READER'S CARD

Please complete the form in BLOCK CAPITALS and show TWO OFFICIAL PROOFS of your identity. At least one proof must include your SIGNATURE, and one YOUR NAME AND ADDRESS.

TITLE	FAMILY NAME			
FIRST NAME(S)	MALE / FEMALE			
	(delete as appropriate)			
HOME / PERMANENT ADDRESS	For students, visitors to Sheffield, and those on			
	official business, address (in case we need to contact you) for TERM-TIME/HOTEL/OFFICE			
Postcode				
TELEPHONE				
Landline	Until (date)			
Mobile	TELEPHONE			
EMAIL ADDRESS				
DATE OF BIRTH eg 05 AUG 63 This information is used as a security measure.				
DISABILITY				
Do you consider yourself to be disabled? YES / NO (delete as appropriate)				



We want to make sure we meet the needs of everyone in the community. Please help us to do so by ticking the appropriate box about your racial and cultural origins; if you tick any of the boxes, you agree to the Council processing this information, to enable Sheffield Libraries, Archives and Information to develop and target their services to you. (YOU DO NOT HAVE to give this information):			
White British (BR) Irish (IR) Gypsy or Traveller (GT) Any other white background (AOW) Mixed Race White and Black Caribbean White and Black African (W White and Asian (WA) Any other mixed background	Black or Black Caribbear African (A Somali (S) Any other (WBC) BA)	nck British n (CAR) FR)	background (AOA) British kground (OC)
BY SIGNING THIS FORM			
(a) I apply to become a registered user of Sheffield City Archives and Local Studies Library;			
(b) I give my explicit consent to you using my information for the purposes of registering me as a user, and managing the archives service;			
(c) I have read and agree to abide by the searchroom regulations and People's Network Acceptable Use Policy.			
SIGNATURE			DATE
If you wish to know more about our data protection policy we have a Data Protection Officer who can be contacted in the Chief Executive's Directorate in the Town Hall, S1 2HH			

STAFF USE ONLY BELOW THIS LINE

Proof of identification

1.

2.