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.

<table>
<thead>
<tr>
<th>TITLE</th>
<th>FAMILY NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FIRST NAME(S)</th>
<th>MALE / FEMALE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(delete as appropriate)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HOME / PERMANENT ADDRESS</th>
<th>For students, visitors to Sheffield, and those on official business, address (in case we need to contact you) for TERM-TIME/HOTEL/OFFICE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Postcode

TELEPHONE

Landline

Mobile

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):

Which of the following best describes your ethnic background?

- **White**
  - British (BR)
  - Irish (IR)
  - Gypsy or Traveller (GT)
  - Any other white background (AOW)

- **Black or Black British**
  - Caribbean (CAR)
  - African (AFR)
  - Somali (S)
  - Any other Black background (AOB)

- **Asian or Asian British**
  - Indian (IN)
  - Pakistani (PA)
  - Bangladeshi (BAN)
  - Any other Asian background (AOA)

- **Mixed Race**
  - White and Black Caribbean (WBC)
  - White and Black African (WBA)
  - White and Asian (WA)
  - Any other mixed background (AOM)

- **Chinese or Chinese British**
  - Chinese (C)
  - Other Chinese background (OC)

- **Other Ethnic Group**
  - Yemeni (Y)
  - Other ethnic group (OE)

---

**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.

G:\DEL\Libraries\Information Management\Forms & Templates\ARC registration form .doc