

## **Library Registration Form**

Please fill out and return to the desk with one piece of I.D. showing your name and current mailing address. (Please print clearly)

To see the library's privacy policy, ask for our pamphlet or check our website at cehlibrary.ednet.ns.ca

								Date of Birth											
FIRST name:	MIDDLE Name:			LAST Name				Day	y	Mor	Month Ye			ear		Male			
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Address (Mailing)									lepho	one:							<u> </u>		
City:	Postal Code:					E-mail Address:													
Second Address (Mailing)									Second Telephone:										
						I live in (choose one only):													
City:					Postal Coo	ostal Code:			;	Stewiacke (within					town limits)				
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Mother Tongue:	English		French	French Other				1	$\bar{\Box}$	. (	Col	ches	ter		,				
Each year the Library Foundation raises  Do you give the library permission to								_	East Hants - Corridor*										
money to support the library and its services to you. Would you like to receive information about upon									East Hants										
information about the Foundation?									$\overline{\sqcap}$		Cun	nber	land						
Yes No					Yes No				Halifax (HRM)										
<u> </u>								1	Pictou (Co.)										
									$\overline{\Box}$		We:	st Ha	ants						
Signature	Date							<b>O</b> th	er (N	lova	Sco	tia`	)						
I agree to take responsibility for the materials borrowed on this card and to									Other (Canada)										
abide by the rules and regulations of the Public Library. I will contact the library with any changes to the above information.									Other (International)										
Staff Use Only	CEA		-	۸۵	dress V	erified		1		* Fo	r libr	rary p	ourpo	ses,	"Ea	ast Han	ts		
otan Ose Offiy	CEJ CETBA			Address Verified yes no (mail card)						com	mun	nities:	: Belr		Elm	nsdale,			
			Enfield, Lantz, Milford, and Nine Mile River																
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Library Card No.									Loc	ation	า:			$\neg$	Ī	Initials:			
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