

**Personal Details**

Surname/Family name:

Forenames(s):

Address:

Email address:

Telephone number:

Please tick which of the following memberships apply to you:

I am a student/staff member of a university other than Liverpool John Moores University. <b>Please specify:</b>	<input type="checkbox"/>	I am a student/staff member of a further education college. <b>Please specify:</b>	<input type="checkbox"/>
I am a member of the SCONUL Access Scheme.	<input type="checkbox"/>	I am a graduate of Liverpool John Moores University.  Year of graduation:  Subject of study:	<input type="checkbox"/>
I am a member of the public.	<input type="checkbox"/>	I am a staff member at a school. <b>Please specify:</b>	<input type="checkbox"/>
I am a member of an organisation not listed above. <b>Please specify:</b>	<input type="checkbox"/>		

**Walk-in user declaration**

I confirm that the information supplied above is accurate and true. I hereby give my consent for Liverpool John Moores University to use the personal data given above to support the administration of the walk-in access service in accordance with the Data Protection Act 1988.

**I have read and understood the acceptable use policy and agree to abide by its terms and conditions.**

Signature:

Date:

**Library use only**

Proof of ID supplied:

Date of registration:

Date of induction (first visit only):