Family Library Account Application Form

Please tick the option that applies to you:

☐ I want to change my parent library accounts to the new Family Library Account.

☐ I am applying for a Family Library Account for the first time.

1. The name(s) of all current parent library account holders in your family. If you DO NOT currently have any parent library accounts, please go to #2.

   Parent (M) - ______________________________

   Parent (F) - ______________________________

   Other family member - ______________________________

   Other family member - ______________________________

   Other family member - ______________________________

   Other family member - ______________________________

2. The names of all family members with new smart card IDs:

   Parent (M) - ______________________________

   Parent (F) - ______________________________

   Other family member - ______________________________

3. Your Family Key: ________________________

4. Contact details for one member of the family who we can contact regarding overdues, reservations or other enquiries:

   Email address: ______________________________

   Phone number: ______________________________
5. The names of the children in your family who are presently students at the school:

Name: _______________________
Year Group: _______________

Name: _______________________
Year Group: _______________

Name: _______________________
Year Group: _______________

Name: _______________________
Year Group: _______________

Once you have filled out this form, please bring it to the Library along with your Smart Card.

For office use only

Parent Smart Card presented:  YES    NO

Accounts of non-Smart Card holders closed and all books returned:  YES    NO