



Great Stupa LIBRARY

Membership Application

Please use CAPITAL letters.

TITLE FIRST NAME MIDDLE INITIAL LAST NAME

PREFERRED NAME

_____/_____/_____
DATE of BIRTH

STREET NO. STREET NAME

CITY STATE POST CODE

PHONE NO. EMAIL

I apply for membership of the Great Stupa Library. I undertake to conform to the Library's regulations as expressed in the *Membership & Loans Policy* available from <http://www.stupa.org.au/library/>.

SIGNATURE

_____/_____/_____
DATE

.....

OFFICE USE ONLY

TYPE OF I.D. SIGHTED: SIGHTED BY WHOM: DATE:

KOHA PATRON NUMBER: _____

LIBRARY CARD NUMBER: _____