



City of Cape Town Library and Information Services

Membership Application

Proof of ID and current proof of home address must be shown

Library card number											
CoCT Citizen	<input type="text"/>	Subsc	<input type="text"/>	Visitor	<input type="text"/>	Organisation	<input type="text"/>				
	Adult Interm Child		Adult Interm Child		Adult Interm Child						
Gender	M	F		Title		Exp. Date					
Surname					ID / Passport						
Full names											
e-Mail address											
Cell Number					Date of Birth						
Home Address					Postal Address						
Landline					Postal Code						
Work Address											
Landline					Postal Code						
For under 18 year olds, a Parent/Guardian must complete the following:											
Parent/Guardian											
ID number					School						
Please tick the box if you are interested in receiving the monthly book.net list and the Bellville Library newsletter.						YES	NO				
Referent 1	Mr	Ms	Mrs	Initials		Referent 2	Mr	Ms	Mrs	Initials	
Surname					Surname						
Relationship					Relationship						
Address					Address						
					Postal Code			Postal Code			
Tel.no.					Tel.no.						
Card numbers of spouse and/or children											

Signature _____ Date _____

Taken in by: _____ Keyed in by: _____
(staff member) (staff member)
BLOCK REASON