

CAVAL / ULA / OVERSEAS / SECONDARY SCHOOL STUDENTS APPLICATION FOR LIBRARY MEMBERSHIP

ABN567 2158 4204

Use this form for CAVAL / ULA students and staff. Staff and students from overseas universities, and secondary school students. Membership does not include access to electronic resources.

DEAKIN UNIVERSITY LIBRARY

I would like to apply for a Deakin University Library membership.

MY CONTACT DETAILS ARE:

Family name: _____

First name: _____

Address: _____

_____ Email: _____

Phone: (Home) _____ (Work) _____ (Mobile) _____

Name of my University / Vic TAFE / Secondary School: _____

Please select from one of the following:	How to join
All Vic University and Vic TAFE – CAVAL Library Membership - Free Undergrad, Grad Dip, Masters (coursework), Hons student <input type="checkbox"/> Postgraduate Research <input type="checkbox"/> Staff – academic, general <input type="checkbox"/>	CAVAL borrowers will need to provide current CAVAL card which can be obtained from your own home university or TAFE library, and some other form of photo identification.
Australian university – ULA Library Membership – free Undergrad, Grad Dip, Masters (coursework), Hons student <input type="checkbox"/> Postgraduate Research <input type="checkbox"/> Staff – academic, general <input type="checkbox"/>	ULA borrowers will need to provide proof of enrolment / employment at other Australian university, and some other form of photo identification.
Overseas university – Overseas Library Membership – free Staff <input type="checkbox"/> Student <input type="checkbox"/>	Staff / students from overseas universities will need to provide proof of enrolment / employment at the overseas university. Some other form of photo identification must be provided. If you are visiting you'll need proof of your temp. Australian address, & your permanent home address.
Secondary School Student – Secondary School Library membership – cost \$20 (inc GST) <input type="checkbox"/>	Secondary school students will need to provide current school or transport card. If under 18 years of age, your parent or guardian will need to sign this form on your behalf.

My student / staff number is: _____ (Not applicable to secondary school students).

Deakin University is subject to the Information Act 2002 (VIC) and is committed to protecting your privacy. The personal information you agree to provide via this form will be used in relation to the provision of lending services, including mechanisms for the recording and payment of any outstanding debts in relation to overdue or lost items. You may access this information on request.

The CAVAL Reciprocal Borrowing Program is subject to the information Privacy Act 2000 (Vic). And the Privacy Act 1988 (Cth). The participating Libraries are committed to protecting your privacy. The personal information you agree to provide via this form will be shared between the Libraries in relation to the provision of lending services, including mechanisms for the recording and payment of any outstanding debts in relation to overdue or lost items. You may access such information upon request at your Home Library.

I have read and understood the **Deakin University Library Conditions of Loan and Library Use**, www.deakin.edu.au/library/services/CondLnUse.php, and I agree to abide by the terms of borrowing. I accept responsibility for any loss, damage or late return of items borrowed on my membership card. I understand that membership access to electronic resources is personal, non commercial, and not to be shared with other individuals.
(If you are under 18 years of age, you will need to have your parent or guardian sign this form on your behalf.)

Cash payments or EFTPOS can be made in person on weekdays at the Cashier's office during business hours, at any campus. Note that cash payments cannot be made at the Library. Cheques or completed credit card information can be submitted at the Library.

Signature: _____ Date: / /

Please charge \$..... to my credit card MasterCard Visa
 Cardholder's name _____ Card expiry ____ / ____

Card number

Signature of cardholder _____

Library use only

Received by: _____

Expiry date / /

Ptype: _____

Institution: _____

Faculty: R

Category: _____

Place barcode here

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Input date	Initials
Renewal date	Initials