

Application to Join Birkbeck Library Affiliate membership



The details you give us on this form will be used for library purposes only. The College policies on the use of information can be viewed at www.bbk.ac.uk/about_us/policies

Please print all details in **block capitals**

A

Your details	
Surname	Title
Forename(s)	
Full UK home address	Telephone number(s) home: work: mobile:
Email address (Library notices are sent by email)	

Your home institution	
College or University name	Degree level / Job title
Department / course name	End date of course / staff contract

Do you have a disability or particular need that means you require extra assistance in the Library? Yes/No
Would you like the Library to contact you to discuss this? Yes/No

I agree to abide by Library and Computing Regulations, which are available on the College web site at: http://www.bbk.ac.uk/lib/about/hours/regs and http://www.bbk.ac.uk/its/regulations	
Signed	Date

B

Intercollegiates: if you are registered at another college and taking a course at Birkbeck your Birkbeck tutor needs to complete this section.	
Name of tutor	School
Signature	Date

C

Researchers without a SCONUL Access card or M25 card: to be completed by the head of department/supervisor of staff or research students from UK publicly-funded higher education or M25 or SCONUL institutions applying for a borrower's card.	
I confirm that the person named above is a member of staff/research student (delete as applicable) at this college. I guarantee that the home institution will pay for the replacement of any items borrowed and not returned.	
Name	College/Institution
Department	College/Institution stamp
Signature	
Date	

