

Date:.....

Dear visitors!

To receive a library card please complete this form. Name and date of birth must be documented with a valid ID. These data are processed electronically and are not shared with any third party.

Full name *	
Date of Birth *	
Address, city, zip code *	
email address *	
Profession	
Affiliation	
Municipal department (if applicable)	
Number of library card (filled in by library staff)	

* mandatory

By signing I acknowledge Wienbibliothek's library regulations.

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Signature

If you are interested in receiving current information about the library (events, remarkable acquisitions, changes in opening hours...) please tell us your email address:

email address	
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Please sign the declaration of consent which is necessary according to Austrian telecommunications law:

By signing I agree to Wienbibliothek sending me current information via email.

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Signature