

Tlf.: 54 67 75 00 E-mail: bib@lolland.dk www.lollandbib.dk

## Registration

- for children and young people under the age of 18 as a new library user (must be filled out by pen)

As parent/guardian I hereby give my consent to

The child's CPR-number (or for	reign number/birthday):
The child's name:	
The child's address (street nar	ne):
Zip code:	City:
can use the library in relation to the library's regulations and code of conduct and is obligated to pay fines upon late returns and compensations for lost and damaged materials. If the regulations are not fulfilled, I am personally accountable for this.  Parent/guardian	
Name:	
CPR-number (or foreign number/birthday):	
Address (street name):	
Zip code:	City:
Mobile number (for SMS)	E-mail:
Date:	Personal signature:

Remember to bring the child's yellow health card.