**GMIT Library Membership Application**

Staff Alumni External NUIG Fee €\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Name** |  |
| **Address** |  |
| **Email** |  |
| **Phone Number** |  |
| **Course/Department** |  |
| **Date** |  |
| **Staff No.** |  |

I have read the Library Regulations and agree to abide by them.

I understand that:

* My personal data will be processed according to [GMIT Libraries’ Privacy Notice](https://library.gmit.ie/website-policies/)
* My photograph will be taken to facilitate the production of my library membership card and will be deleted thereafter.

**Applicant’s Signature­­­­­­­­­­­­­­­**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_