## **Chawton House Reader Application Form**

Name:	
Date or period of visit:	
Address:	
Temporary address whilst	
visiting the library	
(if applicable)	
Academic Institution	
(if applicable)	
Mobile	
Email:	
Forms of identification	1.
shown	2.
(one with photo ID, one	
showing full-time address)	
Signature of the reader	
Your signature confirms that:	
1. The information provided here is true and accurate	
2. You have read and agree to comply with	
<ul><li>Rules of the Reading Rooms (provided)</li><li>Book handling requirements (provided)</li></ul>	
Reproduction of Materials Sheet (provided)	
3. That you agree for Chawton House to store the details contained in this form, as per the	
Data Protection Act 2018	
Signed:	Date:
oigneu.	Date.
Approved and signed by:	
Date:	