

LIBRARY

USER CARD APPLICATION

APPLICANT DETAILS

Surname

Name

Date of birth/...../..... ID o Passport

Address Street and number

Postal district

City

Province

Profession

Phone number

Mobile number

E-mail

I wish to receive information on the activities of IVAM.

APPLICATION

That as an adult, requests to be issued the card user to use the Loan Service of the **Library of IVAM**, declaring meet the performance standards and being responsible for the loss or deterioration of documents rendered to him.

AMOUNT: 5,00€

Signature: _____