

Registration card



LAST NAME:

FIRST NAME:

.....
date of birth

PESEL:

☐ I don't have a PESEL number

ADDRESS:

.....
street

.....
no. / flat no.

.....
postal code

.....
city / town

.....
country

CORRESPONDENCE ADDRESS (FILL IN IF IT IS DIFFERENT FROM YOUR HOME ADDRESS)

.....
street

.....
no. / flat no.

.....
postal code

.....
city / town

.....
country

☐ *student

☐ *employed

☐ *unemployed

I hereby consent to receive information electronically regarding the use of the collections of the Regional Public Library in Krakow.

☐ Yes

☐ No

I hereby consent to receive information electronically regarding events organized by the Regional Public Library in Krakow.

☐ Yes

☐ No

.....
e-mail

I consent to the processing of my personal data in the reader database of the Regional Public Library in Krakow, in accordance with the provisions of the Personal Data Protection Regulation. Information regarding the protection of personal data can be found in the Library's Rules and Regulations.

I hereby declare that I have read the Rules and Regulations in place at the Library and undertake to comply strictly with them.

.....
date

.....
legible signature

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date

.....
legible signature

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fill in for minors

.....
surname and name of the parent or legal guardian

.....
street

.....
No. / flat No.

.....
postal code

.....
city / town

.....
e-mail

I assume responsibility for fulfilling the liability towards the Library.

.....
signature of the surety (parent or legal guardian)

Registration card



fill in for minors

.....
surname and name of the parent or legal guardian

.....
street

.....
No. / flat No.

.....
postal code

.....
city / town

.....
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