

SINU LIBRARY REGISTRATION FORM

Section A: Patron Identity

Surname:

Date / /

First Name:

Other Name

Date of Birth: / /

Salutation: Mr Mrs Miss Ms

ID Number:

New Student: Continuing Student

Lecturer Support Staff

Section B Address

<input type="text"/>
<input type="text"/>
<input type="text"/>

Section C Contacts

Phone (Cell)	<input type="text"/>
Phone (Work)	<input type="text"/>
Phone (Home)	<input type="text"/>
Email (Home)	<input type="text"/>
Email (work)	<input type="text"/>
Fax	<input type="text"/>

Section D Program

<input type="text"/>
