Join: Educator Borrowing

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| Organisation Name: |  |

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| Postal Address: |  | Suburb: |  | Post Code: |  |

#### Head of Organisation Agreement:

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| I, (Head of Organisation’s name) |  | agree to the stated conditions. |

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| Signature: |  | Date: |  |

##### Conditions of Membership

* A new enrolment form is required for every new school year.
* This contract covers all classes listed on page 2. Please amend staff names as required.
* The cards for each class will be kept and used at the Library of the Teacher's/Supervisor's choice.
* There is a maximum of three (3) items per topic.
* Borrowing is for class use only, not an educator’s personal reading.
* No overdues are charged.
* The teacher agrees to make every reasonable effort to return items on time and recover lost items.
* At any time, the teacher may request a list of items still to be returned.
* Items may be renewed twice. If at the end of this period the items have not been returned, the school undertakes to pay the replacement cost for each item.
* The School undertakes to pay for any damages or loss to Library items.
* Payment must be made before New Year classes resume.
* In the case of preschool institutions, the head teacher will nominate those who may use the card (ID is required from these nominees outside of group visits).
* There is no SMART opt in choice, card is for local use only.

##### Library Application for Registration

1. I/we acknowledge that:-

Personal information concerning me/us provided to the Hutt City Council (“the Council”) whether contained in this form or otherwise obtained is provided and may be held, used and disclosed by the Council

* 1. to enable the Council to communicate with me/us for any purpose;
  2. to enable the Council to provide me/us, or have provided to me/us, advice and information concerning products and services that the Council believes may be of interest to me/us;
  3. to enable the Council to administer and maintain its records and carry out its required functions.

1. The personal information provided in this form is collected by and will be held by the Council, whose address is Private Bag 31-912, 30 Laings Road, Lower Hutt.
2. If I/we fail to provide any of the information required, the Council may be unable to process the application.
3. I/we have the right under the Privacy Act 1993 to obtain access to and to request correction of any personal information the Council holds concerning me/us.

Hutt City has a Privacy Officer. If you have any concerns regarding privacy issues, please telephone 04 570 6666.

Hutt City Libraries, Corner Queens Drive & Woburn Road, PO Box 30037, Lower Hutt 5040, 04 570 6633

library.huttcity.govt.nz, facebook.com/HuttCityLibraries

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| **OFFICE USE ONLY:** |

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| --- | --- | --- | --- |
| Library Staff Name: |  | Date: |  |

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| --- | --- |
| Scan of Signed Contract emailed to school: | Yes No |
| Scan of Signed Contract saved to CM9? | Yes No |

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| Head Teacher - please amend the information in the first three columns as required: | | | |  |  |
|  |  | | **OFFICE USE ONLY:** | | |
| Room Number | Teacher | Email Address | Barcode number | | Pin Assigned |
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Year: 20202022024\_\_\_