

Open Book Library Membership Application Form

Family Name :	Given Name :
Address :	
City :	Postal Code :
Telephone (home) :	Telephone (work) :
Fax :	E-mail :
Occupation :	Date of Birth :
When communicating with you should we use an envelope identifying the Open Book Library or the Gay & Lesbian Community Centre ? YES NO	
Where did you hear about the library ?	
Are you interested in volunteer work at the library ? YES NO	

For your first visit bring :
- proof of identity
- proof of residence
and the \$12.00 yearly membership fee.

<i>To be signed at the library :</i>
I have read and agree to abide by the rules and regulations of the library.
Signature :
Date :

For administrative purposes only

Membership Number :	Date of membership :
Payment : Cheque ou cash	

The library is located in the Centre communautaire des gais et lesbiennes de Montréal (CCGLM) at 2075, rue Plessis, suite 110, Montréal. It is open Wednesdays and Fridays from 1 PM to 8 PM. Telephone : (514) 528-8424