APPLICATION TO USE THE LIBRARY

Applicants must provide evidence of identity and address.
Please complete both sides of this form in BLOCK CAPITALS.

TITLE
FORENAME
LAST NAME

PERMANENT HOME ADDRESS

USERNAME

TEL (home)
TEL (other)

EMAIL

ACCESS FOR PEOPLE WITH DISABILITIES (W)
Please indicate here if you would like to discuss our services and facilities with a member of staff. We will be happy to assist you in any way we can.

HOW DID YOU HEAR ABOUT THE SERVICE? (please tick one)

- ANOTHER LIBRARY (F)
- FRIEND/COLLEAGUE (A)
- TEACHER/LECTURER (H)
- WEBSITE – WELLCOME (C)
- WEBSITE – OTHER (B)
- WALKING BY (I)
- LIBRARY TOUR OR EVENT (E)
- EMAIL/E-NEWSLETTER (N)
- LEAFLET, POSTCARD ETC. (G)
- WORD OF MOUTH (M)
- HENRY’S (K)
- SOCIAL MEDIA (P)
- JOURNAL, MAGAZINE, PRESS ARTICLE (D)
- BROADCAST MEDIA (TV/RADIO) (L)
- ADVERTISING (O)
- OTHER (J)

WHAT IS YOUR MAIN AREA OF INTEREST? (please tick one)

- ANTHROPOLOGY (A)
- ART & ARCHITECTURE (B)
- ETHICS (D)
- HISTORY & WELLBEING (H)
- HISTORY (E)
- HISTORY OF MEDICINE/SCIENCE (F)
- GENEALOGY/FAMILY HISTORY (C)
- PUBLIC ENGAGEMENT WITH SCIENCE (J)
- CURRENT MEDICINE/SCIENCE (L)
- OTHER (M)
WHICH OF THESE BEST DESCRIBES YOU? (please tick one)

- [ ] UNIVERSITY ACADEMIC STAFF (0)
- [ ] HEALTH PROFESSIONAL (4)
- [ ] UNDERGRADUATE STUDENT (11)
- [ ] LIBRARY/ARCHIVE/MUSEUM STAFF (6)
- [ ] POSTGRADUATE STUDENT (10)
- [ ] AUTHOR/WRITER/JOURNALIST (70)
- [ ] SCHOOL OR FE STUDENT (9)
- [ ] MEDIA RESEARCHER (2)
- [ ] TEACHER OR FE LECTURER (12)
- [ ] ARTIST/DESIGNER (75)
- [ ] SCIENTIST (8)
- [ ] HEALTH PROFESSIONAL (4)
- [ ] OTHER (13) Please specify

I will use personal data on living persons for research purposes only. I will not use personal data to support decisions about the person who is the subject of the data, or in a way that causes substantial damage or distress to them.

I have read and accept the regulations detailed in the Library’s Conditions of Use.

Signed: ___________________________ Date: __/__/____

Thank you for providing your details. We may need to contact you from time to time in connection with your Library membership. With your permission, we would like to keep in touch with you about our work.

(L) Please indicate how you would like to be contacted: [ ] Email (E) [ ] Post (P) [ ] Both (B)

(J) If you would like to be kept informed about the work of the Wellcome Collection, tick here: [ ]

(O) If you would like to be kept informed about the work of the Wellcome Trust, tick here: [ ]

To update your details or your communication preferences, to stop receiving communications from us, or to unsubscribe from a publication, please email communication@wellcome.ac.uk

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