




## Registration form at central university library Lübeck




I request for registration for using the library-computer-based loan system. I agree to the library saving my personal details. My data will not be passed on.

Family name: \_\_\_\_\_ First name: \_\_\_\_\_

Date of birth e.g. 01.12.1989 \_\_\_\_\_

<input type="checkbox"/>	<b>1. address</b>		
	street, house number		
	care of e.g. c/o Fr. Meler, Room 2		
	postcode	<b>Town / location</b>	
	p.r.n. country, if not Germany		

Or clinic / institut  
(additionally a home address has to be mentioned) \_\_\_\_\_

<input type="checkbox"/>	<b>2. address</b>		
	street, house number		
	care of e.g. c/o Fr. Meler, Room 2		
	postcode / cip	<b>Town / location</b>	
	p.r.n. country, if not Germany		

E-Mail: \_\_\_\_\_

	<b>Group</b>	<b>Institution</b>	<b>Int. Nr.</b>
<input type="checkbox"/>	Student (Student Card)	Universität University of Lübeck	<b>Matriculation No.:</b> 30
<input type="checkbox"/>		Fachhochschule University of Applied Science	<b>Matriculation No.:</b> 35
<input type="checkbox"/>	Academic staff	Universität University of Lübeck	5
<input type="checkbox"/>		Fachhochschule University of Applied Science	10
<input type="checkbox"/>	Other staff	Universität University of Lübeck	15
<input type="checkbox"/>		UKSH (University Medical Center Schleswig-Holstein)	20
<input type="checkbox"/>		Fachhochschule University of Applied Science	25
<input type="checkbox"/>	Apprentice / trainee	FH, Uni, UKSH	60
<input type="checkbox"/>	Other User	Normal access fee 30,-€ per year	40
<input type="checkbox"/>		Reduced access fee, 15,-€ per year *	70

\*= Pupils, trainees, military service or alternate civilian service, unemployed persons or welfare recipients  
The Number (Int. Nr.) are only for intern purposes.

I hereby confirm the accuracy of my pre-assigned personal details.

Date ..... Signature .....

I hereby agree to comply with library regulations for users in the central university library.

Date ..... Signature .....

Intern Note: PASSPORT with an original authentic / official address document was seen