



**Please complete this section for your child. It will help us to provide services to meet all of your needs.**

Do they like to read in any languages other than English? .....

If so, which ones? .....

Do they have a visual impairment that affects their ability to read print or use computer screens? Yes  No

Do they consider themselves to have any other disability? Yes  No

With regard to ethnic origin, how would you best describe your child?

**White**

British

Irish

White Other

**Black or Black British**

Caribbean

African

Black Other

**Asian or Asian British**

Indian

Pakistani

Bangladeshi

Asian other

Chinese

**Mixed**

White & Black Caribbean

White & Black African

White and Asian

Mixed other

**Other Ethnic Group**

**Thank you**

**Please note:**

As a library member your child will be able to borrow books to take home and to use a computer in the library.

**Please select one from these options:**

- I wish my child to have access to the full range of library facilities including access to computers and the internet. I have read and understand Walsall Libraries' Computer User Contract (please tick)
- I do wish my child to borrow items from the library, but do not wish him/her to have access to the internet (please tick)

I recognise that I am responsible for all items borrowed on this library card and for any access to the internet made via this card.

Signature ..... Date: .....