


BARBADOS COMMUNITY COLLEGE LIBRARY 
LIBRARY REGISTRATION (STUDENT)

Entered in
system

Date: dd / mm / yyyy

Student ID #:

Sex : Male
Female

Name (capitals):

Address: _____

Telephone #: _____ E-mail: _____

Status: Full time Student Division: _____
Part time Student Programme: _____

End of programme (mm-yy): - 20

Additional contact person: Name: _____ / Tel#: _____

I hereby agree to obey all the rules and regulations of the library, to pay all fines promptly, to make good any loss or damage to books incurred by me, and to give immediate notice of any change of address.

Signature: _____