

LUCIS TRUST LIBRARY

Suite 54
3 Whitehall Court
London SW1A 2EF
Tel(020) 7839 4512 Fax (020) 7839 5575 www.lucistrust.org

LIBRARY APPLICATION

(Please Print)

NAME.....

ADDRESS.....

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TELEPHONE NUMBER.....

If the above is not a permanent address, please add it below.

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How did you hear about the Library?

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Please give the names of two people at addresses other than your own to whom reference can be made if necessary:

1.....

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2.....

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I have read the Library rules and procedures supplied with the form of application, and I agree to abide by them.

Signed.....

Date.....