

## **Reader Registration Form**

1) Please complete in block capitals

Name	Preferred title/form of address
Permanent home address	
Telephone	Email
IIK contact addrace (if different from chare)	
UK contact address (if different from above)	
Telephone	
Telephone	
Institutional address (if applicable)	
Places describe briefly year area(a) of interest	
Please describe briefly your area(s) of interest	

**2)** As a security measure, we ask first-time visitors to provide two separate forms of identification: one to prove their name, the other to prove their address. We appreciate that details such as names may change, in which case we will accept additional documentation which indicates such changes. The following documents are currently accepted for proof of address and identity:

Reader Registration Form

## A. Proof of identity (must include a valid signature):

- Passport
- Driving licence
- Bank card
- Credit card

## **B. Proof of address:**

- Driving licence with address
- TV licence
- Utility bill (issued within the last three months)
- Bank / building society/credit card statement (issued within the last three months)
- Credit card statement (issued within the last three months)

Using an online proof of address

You may use a proof of address that was generated online, provided it was issued within the last three months. An online proof of address must have been provided to you in this format by the issuing body or organisation. You can show us your proof of address via your own device (smartphone, tablet or laptop) or by bringing a printout with you. However, you must provide an original proof of identity from the list.

We aim to provide open access to our collections, so please contact us directly at <a href="mailto:archivist@stationers.org">archivist@stationers.org</a> if these ID requirements pose a problem, and we will do our best to accommodate your individual circumstances.

3) Signing this form indicates that you accept and agree to abide by the Stationers' Company Archive Reading Room Regulations. Please ensure that you have access to a copy of these

Regulations, that you have read them, and that you understand them.		
Signed	Date	
This in	formation is for internal use only and will not be passed to any third party.	
For Sta	iff Use:	
	ID verified Proof of address verified	

Staff signature...... Date ....... Date