




I'm going to Chester Lane Library, St Helens



For our eBooks, digital comics
and magazines, please visit:
www.sthelens.gov.uk/ebooks

 [STHLibraries](https://www.facebook.com/STHLibraries)  [@STHLibraries](https://twitter.com/STHLibraries)  [@sthlibrariesandarts](https://www.instagram.com/sthlibrariesandarts)

Before I go to the library

I'm going to Chester Lane Library



If I am nervous about going I can talk to someone and ask questions first
I can call **01744 677081**



I can ask a member of Library staff for a tour of the library



About the library

There are people who work at the library who I can talk to.

If I see a person wearing a red ribbon with Library Staff on it then they can help me



The library is usually a quiet place where people talk quietly, relax and read books



Sometimes it might be noisy. If it is noisy I can talk to a librarian.

Ask about our ear defenders – these might help if it's noisy!



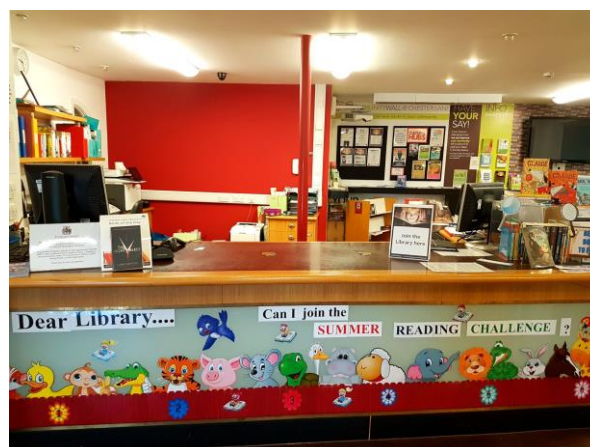
How I become a member of the library

When I get to the library I will see a desk



I will talk to someone who works there to become a member of the library.

If I see a person wearing a red ribbon with Library Staff on it then they can help me



I will tell them my name, address, date of birth, telephone number and email address

I wish to apply for membership of St Helens Libraries

Surname: JONES M/Ms/Ms/Ms/Ms
 First name: HELEN Date of Birth: 26.12.1982
 Address: 12 Apple Street
Newtown-le-Willows Postcode: WA14 4B
 Email: _____
 Telephone: 0234 569876 Mobile: 0798 123456

We use your contact details to manage your account and to bring you news of council services. Please indicate how you prefer to be contacted.
 Email ☐ Telephone ☐ Mobile ☐

The parent/carer of children and young people must complete the sections below:
 I agree to my child joining the library and will pay for lost/damaged items (under 16 only) ☐
 I agree to my child using Internet Services (under 16 only) ☐
 Your name: _____ M/Ms/Ms/Ms
 Address (if different): _____
 Postcode: _____ Telephone: _____
 Signature: _____ Date: _____

By completing the following sections, you will help us to make sure our services meet your needs.
 Do you consider yourself to have a disability? Yes/No
 Physical Disability ☐ Hearing Impairment ☐
 Wheelchair User ☐ Mental Health ☐
 Limited Mobility ☐ Visual Impairment ☐
 Limited Long-term Illness ☐ Learning Difficulty ☐
 Other: _____

Which of these Ethnic Groups best describes you?
 White British ☐ Asian Indian ☐
 White Irish ☐ Asian Pakistani ☐
 Mixed White & Caribbean ☐ Asian Bangladeshi ☐
 Mixed White & Black ☐ Chinese ☐
 Mixed White & Asian ☐ Gypsy/Roma ☐
 Black African ☐ Irish Traveller ☐
 Black Caribbean ☐ Not stated ☐
 Other: _____

☐ I agree to be contacted about events and activities taking place in libraries.
☐ I agree to the procedures of St Helens Council, including the Council's Internet Policy.

Signature: _____ Date: _____

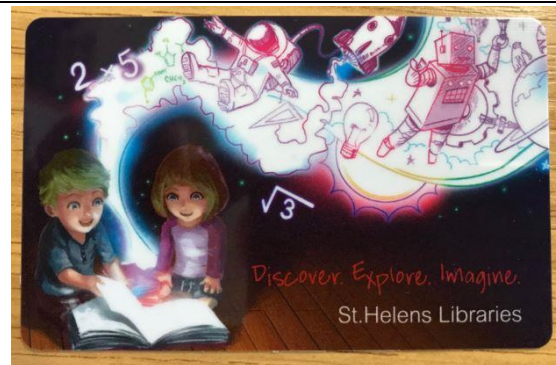
Official Use
 Date: _____
 First name: _____
 Last name: _____
 Working No: _____

I will show them one form of identification which has my address on it. This can include a driving licence, bank statement, or household bill.



I will sign a form. This makes me a member of the library and I will be given a library card.

My parent or carer will also be asked to sign this form.



When I visit the library

In the library there will be shelves of books and DVDs



I can sit in a chair to read a book



I can borrow a book or DVD and take it home with me



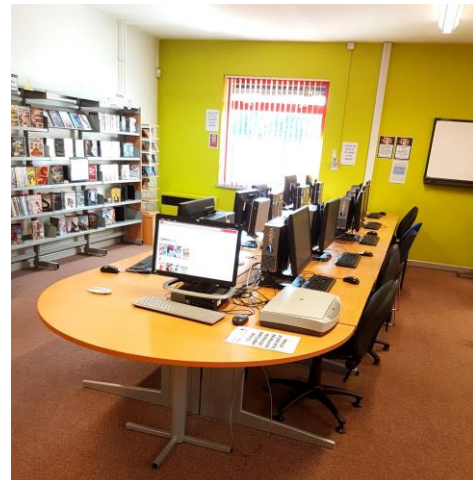
If I want to borrow a book I will talk to a member of the library staff



The staff will show me how to borrow the book or DVD and tell me when I need to bring it back to the library



The library will also have some computers



The computers are free to use



To use the computers I will need to talk to a member of staff who will help me use one.



When I am ready to go home I will leave the library.

