



**Declaration of consent and liability for minors
(under 18 years of age) by parent or legal guardian**

| | |
|---|---------------------------------------|
| Personal information: | |
| Surname: | |
| First Name: | Date of Birth (DD.MM.YYYY): |
| Address: | |
| Street, number: | |
| Postal Code: | City: |
| Country: | |
| Telephone number: | |
| E-mail-address: | |
| Information on child / on legal ward: | |
| Surname: | |
| First Name: | Date of Birth (DD.MM.YYYY): |
| I, the undersigned | |
| consent to my child or legal ward | |
| , born | |
| using Vienna University Library and accept liability for his or her loans. | |
| Liability is automatically transferred to the person to whom the library card has been issued as soon as that person reaches the age of majority. | |
| I acknowledge that I have read, understood and agree to be bound by the terms and conditions laid down in the Library Regulations ("Benützungsordnung für das Bibliotheks- und Archivwesen der Universität Wien (http://bibliothek.univie.ac.at/files/benuetzungsordnung.pdf) according to Mitteilungsblatt Universität Wien, Studienjahr 2003/2004, 4. Stück vom 23.12.2004") and I agree to the personal data of my child or legal ward being processed and passed on in so far as it is necessary to enable my child or legal ward to use the library. | |
| Place, date | signature of parent or legal guardian |

A copy of a photo ID of the parent and/or legal guardian issued by an official authority with clearly visible signature must be produced so that the parent and/or legal guardian's signature can be verified.