

## APPLICATION FORM FOR CHILDREN

Date of birth    social security number (if any)

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Last name	First name(s)
Address in Finland	Postal code and postal office
Telephone	email

### PERSONAL DETAIL OF A PARENT

Date of birth    social security number (if any)

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Last name	First name(s)
Address in Finland	Postal code and postal office
Telephone	email

**I PROMISE TO OBEY  
THE RULES OF THE VAARA-LIBRARIES**

Place and date

\_\_\_\_\_ / \_\_\_\_ 20 \_\_\_\_

\_\_\_\_\_  
Signature of the child

\_\_\_\_\_  
Signature of the parent