

# Library Card Application

Please fill out a form for each family member or yourself. Provide a valid photo ID and proof of address. This application is a contract between you and the library. Your information will not be shared with any third party.



## Patron Information

Last name		Mailing address (please include apartment if applicable)		
First name		City		
Middle name	State	Zip Code	County	

## For Out-Of-Town Students or Temporary Residents:

Permanent address <u>if different from above</u> (please include apartment if applicable)			
City	State	Zip Code	County

## How would you like the library to contact you?

<p>Select one</p> <p><input type="checkbox"/> <u>Email</u></p> <p><input type="checkbox"/> <u>Mail</u></p>	<p>Email (You may receive occasional email updates about library events and information. You can always unsubscribe.)</p>
	<p>Phone ( _ _ _ ) - _ - - - -</p>

## Identifying Information and Signature

<p>Date of Birth</p> <p>____ / ____ / ____</p> <p>(month) (day) (year)</p>	<p><b>Parents sign for ages 0-12 years</b></p> <p>I agree to be responsible for material borrowed with this card, for all fines incurred, and for loss and damage of material charged upon it.</p> <p>I accept responsibility for the selection of materials made by this person.</p> <p>_____</p> <p>Signature of Legal Parent or Guardian</p> <p>_____</p> <p>Printed Name of Legal Parent or Guardian</p>
<p>Age range (Circle one)</p> <p>(CH) (YA) (A) (S)</p> <p>1-12 13-17 18-64 65 &amp; over</p>	
<p>I agree to be responsible for material borrowed with this card, for all fines incurred and for loss and damage of material charged upon it.</p> <p>_____</p> <p>Signature</p>	