

Library Card Application

Adult/parent/guardian information:			Please PRINT clearly.			
Last name	First name	Mic	Birth date Middle name			
Home (residence) address (not PO box)		Apt/Sp #	City	State	Zip	
Home Phone	Cell Phor	ne	Provide	er		
				(for text notification)	
Email address (requi	ired for library notifications)					
Maintain reading his	tory (keeps track of what is	checked out) □Yes □I	No □Welcome	card (group facilities, 2 it	:ems)	
 To report change To report the loss checked out prior 	ard, I agree: ry policies with regard to facts s to my account information s, theft, or abuse of this card r to reported loss or theft. ure: I agree to the terms abo	n such as address, pho d immediately. I am res	ne number, and e ponsible for fines	and fees and any items		
	O l. C l.	9.1				
Child	<u>Cards for cn</u> I's name (last, first, middle)	ildren in household (15	<u>and younger)</u> Birth date	Child card# (Librar	v use)	
To be responsibTo report changeTo report the los	dren's cards, I agree: le for child's use of library mes to child's account's informs, theft, or abuse of this can br to reported loss or theft.	mation such as addres	s, phone number,	and email address.		
Printed Parent/	Guardian Name	Parent/Guardian Signa	iture -	Relationship to child		
Library use: Adult card #	DL/ID#(nun	nbers only)	Add	dress confirmed in distric	t: 🗆	
Out of district fee:	f district fee: Annual full service \$		□Quarterly \$ Paid by:□Cash □Check □CC			
	Scholarship □Propo (documentatio Date Re	n attached for fee waiv	er)	□Educator / Stud (confirm by ID nitials:Date:))	