



Applicant

Name: Last: _____ First: _____ Middle Initial: _____

Home Address: Street 1: _____

Street 2: _____

City: _____ State: _____ Zip Code: _____

Mailing Address: _____

(PO box or if different than home address)

How would you like to receive Library notifications (check all that apply)? Email Text Phone/Mail

Phone carrier text charges may apply. Text messages are sent throughout the day.

Primary Phone (required): _____ If text requested, Carrier: _____

Cell number required for text

Email Address: _____

Birth Date: _____ / _____ / _____
Month Day Year

Driver's License # or Other ID # (applicant or parent/guardian): _____

Would you like to receive the monthly Library eNewsletter? Yes No

Note:

I agree to observe all Library rules and will be responsible for all materials borrowed on my card. I also agree to pay fines for late returns or other charges for lost or damaged materials. I will notify the Library if my card is lost or if I change my name or address.

Signature of Applicant _____

For applicants age 14 and under, parent/guardian must complete this section.

Parent/Guardian Name: _____

Address: _____ Phone: _____

(If different than address above)

Parental consent required for applicant to use Library public computers. Would you like to complete an Internet Permission form to grant access? Yes No

Signature of Parent/Guardian: _____

Staff Use: Address verified? Yes No ID seen? Yes No

Barcode Number: 10006 _____

Date: _____ Initials: _____