



LIBRARY CARD APPLICATION

DATE: _____

Picture ID and proof of address are required for all registrations.
If you are 12 years of age or under, your parent/guardian must sign the application form.

PLEASE PRINT

LAST NAME		FIRST NAME		MIDDLE	
MAILING ADDRESS					APT. #
CITY		STATE	ZIP CODE		COUNTY
RESIDENCE ADDRESS (IF DIFFERENT THAN ABOVE)					APT. #
CITY		STATE	ZIP CODE		COUNTY
()			()		
TELEPHONE			CELL #		
DRIVER LICENSE / ID			STUDENT ID		
NAME OF SCHOOL		GRADE		DATE OF BIRTH – IF UNDER 18	
AGE (CHECK ONE): <input type="radio"/> 0-12 YEARS <input type="radio"/> 13-17 <input type="radio"/> 18-PLUS					

E-MAIL (IF YOU WISH TO RECEIVE LIBRARY NOTICES BY E-MAIL INSTEAD OF U.S. MAIL)

I agree to abide by Library rules and to pay for any loss of, or damage to Library materials and to pay overdue fines accumulated on this card. I understand I am responsible for notifying the Library in case of loss or theft of this card. Failure to do so will result in my being held liable for materials on this card and for fines incurred on the card. I also agree to inform the Library of any street address or e-mail changes or change in the status of parent/guardian.

YOUR SIGNATURE _____

SIGNATURE OF PARENT/GUARDIAN (IF APPLICANT IS 12 YEARS OF AGE OR YOUNGER) _____ **PRINT NAME** _____

PLEASE DO NOT WRITE BELOW THIS LINE

TYPE: JV YA AD HB RES NON-RES HOME LIBRARY _____ SCH CODE: _____

6 MOS _____ 12 MOS _____

PID # 1380000 _____ INITIALS: _____