

Library Card Application



IDENTIFICATION REQUIRED:

- Photo ID (e.g. Driver's License, State I.D. Card)
- Proof of Current Address (e.g. Driver's License, State I.D. Card, Recent Mail, Checkbook)

PATRON INFORMATION (PLEASE PRINT):

Name: _____
Last First Middle

Preferred Name: _____ Birthdate: _____ / _____ / _____ Age Group: 0-17 18-64 65 +
Month Day Year

Mailing Address: _____
Street or P.O. Box City or Village State Zip

County: _____ Township: _____

Residential Address (If different from mailing address):

_____ Street or P.O. Box City or Village State Zip

Primary Phone: _____ Email: _____

Please add me to the library's email list: Adult Teen Youth

I would prefer to be notified of my holds by: Email Phone Text

Please notify me via email that my library items are due: Yes No

Library (or bookmobile stop) where I would prefer to pick up my holds: _____

ACCEPTANCE OF RESPONSIBILITY (Please read carefully):

- I will be responsible for all materials checked out on this card, including materials checked out by others with or without my consent, unless I have previously reported the loss of my card.
- I will report a lost or stolen card, or any change of personal information (name, address, phone, email) immediately.
- I will comply with all library rules and policies.
- I understand that there will be charges for overdue, lost, damaged and stolen library materials.
- I understand that the library provides access to a broad range of resources and that it is my responsibility to judge for myself and for my children or minor dependents what resources are appropriate for my/our personal use.

Patron Signature: _____ Date: _____

FOR JUVENILES (AGE 0-15), PLEASE COMPLETE:

Please Print Parent or Legal Guardian Name: _____

Parent or Legal Guardian Signature: _____

FOR LIBRARY STAFF USE ONLY:

Staff Initials/Library Verifying ID: _____

Proof of Current Address:

Patron Category: _____

PSTAT (Sort 1): _____

Photo ID Type: _____

ID # (Optional): _____

Type of Registration:

- New Patron Lost Card
- Address Change Renewal
- Name Change (Former Name: _____)

Send Application To: _____

Patron has been issued card with barcode _____ from _____.