



Library Card Application

PLEASE PRINT

Last Name: _____ First: _____ Middle: _____

Mailing Address: _____

City/State/Zip Code: _____

Home Phone: (_____) ____ - _____ Cell Phone: (_____) ____ - _____

Email address: _____

Please circle one: Adult (18 and up) Teen (14 -17) Computers Only Please circle one: Female Male

Please list one of the following forms of Identification: Driver's License: State: ____ Number: _____

Military ID: _____ State ID Card: State: ____ Number: _____

Other: (e.g. rent, utility, or property tax receipt) _____

Would you like the library to maintain a list of the items you have checked out? YES NO

Would you like to receive due date reminders and notices of arrived requests by email? YES NO

Would you like to receive information about new and upcoming books & DVDs releases, programs, and events by email? YES NO

(Birth date information is used to distinguish your account from other patron accounts, especially from those with similar names.)

Date of Birth: _____ / _____ / _____
(Please use numbers) Month Day Year

PLEASE READ BEFORE SIGNING: I verify that this information is correct and I assume financial responsibility for materials borrowed or charges incurred on any card issued from this application. Please bring proper ID and current address confirmation with you when you apply for the library card. I understand that I am the only person permitted to use this library card.

Signature: _____ Date: _____

Office use only

Library Card Number: 29488 _____ Employee Initials: _____