

FAMILY LIBRARY CARD APPLICATION
IDENTIFICATION REQUIRED FOR PARENT OR GUARDIAN:



- Photo I.D. (such as Driver's License, State I.D. Card)
- Proof of current address (such as Driver's License, state ID, recent mail, checkbook, etc.)

PARENT OR GUARDIAN INFORMATION (please print):

1. Name: _____
Last First Middle Initial

Preferred First Name: _____
(Leave blank if not applicable)

Birthdate: ____/____/____ **County of Residence:** _____ **Township:** _____
Month Day Year

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

Residential Address: (Complete if different than mailing address)

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

Primary Phone: (____) _____ **Email Address:** _____

Please send me an email reminder two days before items are due: Yes No

Please notify me my holds are ready for pickup with one of these options:
 Email (same day) Text Message (next day) Phone (next day) Prefer not to be notified

Would you like the children's account(s) and the parent/legal guardian signing for these account(s) to be able to pick up each other's holds? Yes No

ADD CHILDREN AGES 0-15 (CHILDREN RECEIVE THEIR OWN LIBRARY CARD AND ACCOUNT)

2. Name of Child: _____
Last First Middle

Birthdate: ____/____/____ **Date:** _____
Month Day Year Signature

ACCEPTANCE OF RESPONSIBILITY—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 a loss of my card.
- I will be responsible for all materials checked out on Juvenile (age 0-15) cards issued to my child(ren) or juveniles (age 0-15) for whom I am a legal guardian.
- 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 lost, damaged, and stolen library materials, as well as overdue fines for Outerlibrary Loan 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 and or minor dependents what resources are appropriate for my/our personal use.

PLEASE PRINT ADULT PATRON NAME: _____

ADULT PATRON SIGNATURE: _____
(Over)

3. Name of Child: _____
Last First Middle

Birthdate: ____/____/____ _____ Date: _____
Month Day Year Signature

4. Name of Child: _____
Last First Middle

Birthdate: ____/____/____ _____ Date: _____
Month Day Year Signature

5. Name of Child: _____
Last First Middle

Birthdate: ____/____/____ _____ Date: _____
Month Day Year Signature

6. Name of Child: _____
Last First Middle

Birthdate: ____/____/____ _____ Date: _____
Month Day Year Signature

FOR LIBRARY STAFF USE ONLY:

- Type of registration: New patron(s)
 Lost card(s)
 Name change (Former name: _____)
 Address change
 Renewal

Staff initials verifying ID: _____ Proof of address: Photo ID type: _____ Patron category: _____

Sort 1 (PSTAT): _____ Send application to: _____

- Email SM to subscribe to newsletter Hold pickup authorizations

Patrons have been issued cards with these barcodes:

1. _____ 2. _____
3. _____ 4. _____
5. _____ 6. _____