



Applicant must present photo identification that includes their name and current address. If the address on the ID is incorrect, we will accept a printed personal check, utility bill, mail, etc. as proof of address. Minor children must accompany a parent or legal guardian with proper identification.

PLEASE PRINT	Date		□ Male	☐ Female			
Name	First	Middle	Last		Suffix		
Street			F	Post Office Box_			
City	State	Zip	Schoo	ol District			
Driver's license or state ID number			Birth Date / /				
Email Address							
Phone () Carrier (for text notification)							
Please notify me by: ☐ E-mail ☐ Phone ☐ Text							
As per the Library this application ar fees as incurred, p	rts its patrons' right Borrower Policy, Ind agree to comply baying for all lost o information, and r ard.	accept responsil with library rules r damaged mater	pility for monit and procedurials, providing	oring all accou es, paying all f immediate no	ints listed on ines and tice of		
Signature							
ADDITIONAL INFORMATION FOR APPLICANTS AGE 17 AND UNDER							
Parent/Guardian (P	Print)				_		
1. Child's Name:	First	Middle	Last		_		
☐ Male ☐ Fe	emale						
Birth Date / _	Birth Date / / Library (ird #22859				
For office use only Library Card Numb	er 2 2859		Staff I	nitials			

2. Child's Name:First	Middle	Last			
☐ Male ☐ Female					
Birth Date / /	Library Card #22859				
3. Child's Name:First	Middle	Last			
☐ Male ☐ Female					
Birth Date / /	Library Card #22859				
4. Child's Name:First	Middle	Last			
☐ Male ☐ Female					
Birth Date / /	Library Card #22859				
5. Child's Name:First	Middle	Last			
☐ Male ☐ Female					
Birth Date / /	Library Card #22859				
6. Child's Name:First	Middle	Last			
☐ Male ☐ Female					
Birth Date / / Library Card #22859					

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