



**Library Card Application /
Borrower's Agreement**

Name:

Please Print

Last	First	Middle
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Home

Address:

Street	Apt.#
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City	Zip Code
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Mailing

Address:

(If Different from Above) Street	Apt. #
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City	Zip Code
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Parent/Guardian Name:

(If Under 18 Years Old)

Phone ()	()
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Home

Business

Employer/School:

E-mail Address:	Primary Reading Language
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Birthdate: <i>(Optional)</i>	Circle one: M F
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I agree to follow library rules, be responsible for materials charged to this card and notify the library when any information I have given is changed. I agree to notify the library immediately if this card is lost or stolen. **I will bring my card each time I visit the library.** The library does not limit access to materials based on age of user. Restricting a minor's access is the responsibility of the parent or guardian.

- I am interested in joining the Friends of the Library
- I am interested in receiving the Library's monthly e-mail newsletter and other occasional e-mail communications from the Library.

X

Signature

X

Signature of Parent or Guardian for applicants under 18 years old

Staff Use		Rev 9/07
DMV/Other ID		Home Library:
P-Type:	2904	
Init/Lib:	P#:	Census