

Library Card Registration Form

Please complete this form to apply for a library card. Print clearly.

Applicant Information

First Name:

Middle Initial:

Last Name:

Date of Birth (MM/DD/YYYY):

Contact Information

Street Address:

Apartment/Suite/Unit:

City:

State:

Postal / ZIP Code:

Phone Number:

Email Address:

Identification

ID Type (e.g., Driver's License, Utility Bill):

ID Number:

Parent / Guardian Information (If Applicant is Under 18)

Parent/Guardian Full Name:

Parent/Guardian Phone Number:

Terms and Signature

By signing, I agree to abide by all the rules and regulations of the library, accept responsibility for all materials borrowed on this card, and pay any fines or fees associated with lost or damaged materials.

Applicant Signature (or Parent/Guardian if under 18):

Date (MM/DD/YYYY):

For Library Use Only

Library Card Number Issued:

Staff Member Initials:

Date Registered (MM/DD/YYYY):

