



IDENTIFICATION REQUIRED:

- Photo I.D. (i.e. Driver's license, state I.D. card)
Proof of Current Address (i.e. Driver's license, state I.D., recent mail, check book)

PATRON INFORMATION (please print):

Name: Last First Middle

Birthdate: / / Female Male Age Group: 0-17 18-61 62+

Mailing Address: Street, RR/Fire Number or P.O. Box City or Village State Zip

County of Residence: Township:

Residential Address: (Complete if different from mailing address)

Street, RR/Fire Number or P.O. Box City or Village State Zip (if outside city/village limits)

Home Phone: () Email Address:

Business Phone: () Extension:

I would prefer to be notified of my holds by: Email Phone

Library (or bookmobile stop) where I would prefer to pick up my holds: (Home Agency)

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 the loss of my card.
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 overdue, lost, damaged and stolen library 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 or minor dependents what resources are appropriate for my/our personal use.

PATRON SIGNATURE: Date:

FOR JUVENILES (AGE 0-13), PLEASE COMPLETE:

Parent or Legal Guardian Signature:

Please print Parent or Legal Guardian Name:

FOR LIBRARY STAFF USE ONLY:

Send to: Home Agency: (default pickup location) Initial when ID checked: Photo ID: Proof of Current Address:

From: Sending library check one: Patron has card with barcode # from (library) Issue card with this barcode and mail to patron Former name: New Registration Address Change Name Change Lost Card Renewal

(Staple barcode here)



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PATRON SIGNATURE: Date:

FOR JUVENILES (AGE 0-15), PLEASE COMPLETE:

Parent or Legal Guardian Signature:

Please print Parent or Legal Guardian Name:

FOR LIBRARY STAFF USE ONLY:

Initial when ID checked:

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Photo ID:

From:

Proof of Current Address:

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Issue card with this barcode and mail to patron

New Registration

Address Change

Former name: Name Change

Lost Card

Renewal

(Staple barcode here)

