## 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	
Birthdate: / / County of Res	ty of Residence: Township:		
,			
Mailing Address: Street or P.O. Box	City or Village	State Zip	
Residential Address: (Complete if different that	an mailing address)		
Street or P.O. Box	City or Village	State Zip	
Primary Phone: ()	Email Address:		
Please send me an email reminder two days be	fore items are due: $\Box$ Yes $\Box$	No	
Please notify me my holds are ready for pickup	with one of these options:		
🗆 Email (same day) 🛛 Text Messa	ge (next day)	y)	
Please send me the library's monthly email new	/sletter: □Yes □No		
Would you like the children's account(s) and the	e parent/legal guardian signing for th	ese account(s) to be able to pick up	
each other's holds? □Yes □No			
ADD CHILDREN AGES 0-15 (CHILDR			
2. Name of Child:			
Last	First	Middle	
		5.4	
Birthdate:// Month Day Year	Signature	Date:	
ACCEPTANCE OF RESPONSIBILITY—READ	CAREFULLY		
• I will be responsible for all materials checke	d out on this card, including material	s checked out by others with or	
<ul> <li>without my consent, unless I have previous</li> <li>I will be responsible for all materials checke</li> </ul>		ssued to my child(ren) or juveniles	
(age 0-15) for whom I am a legal guardian.			
<ul> <li>I will report a lost or stolen card, or any char</li> <li>I will comply with all library rules and policie</li> </ul>		address, phone, email) immediately.	
• I understand that there will be charges for lo		erials, as well as overdue fines for	
<ul> <li>Outerlibrary Loan materials.</li> <li>I understand that the library provides access myself and for my children and or minor dependence.</li> </ul>			
	sendente milat resources are approp	nato tor mytour personal use.	
PLEASE PRINT ADULT PATRON NAME:			

<ol><li>Name of Child:</li></ol>			
	Last	First	Middle
Birthdate:/ Month Da	_/ y Year	Signature	Date:
4. Name of Child:			
	Last	First	Middle
Birthdate:/ Month Da	_/ y Year	Signature	Date:
5. Name of Child:	Last	First	Middle
Birthdate:/ Month Da	_/ y Year	Signature	Date:
6. Name of Child:	Last	First	Middle
Birthdate:/ Month Da	_/ y Year	Signature	Date:
FOR LIBRARY STAF	F USE ONLY:		
Type of registration:	□ New patron(s)		
	□ Lost card(s)		
	□ Name change (Former na	me:	)
	□ Address change		
	□ Renewal		
Staff initials verifying I	D: Proof of add	dress:  Photo ID type:	
Patron category:	Sort 1 (PSTAT):		
Email SM to subsc	ribe to newsletter	lold pickup authorizations	
Patrons have been iss	sued cards with these barcodes	:	
1		2	
3		4	
5		6	