

## APPLICANT INFORMATION

NAME \_\_\_\_\_  
First Middle Last

PIN \_\_\_\_\_

To access online library account  
Between 4 and 10 characters

GENDER  Male  Female

BIRTHDATE \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Month Day Year

HOME ADDRESS \_\_\_\_\_  
Street Address City State Zip Code

MAILING ADDRESS \_\_\_\_\_  
If different P.O. Box / Street Address City State Zip Code

PHONE ( ) \_\_\_\_\_ ALTERNATE PHONE ( ) \_\_\_\_\_

EMAIL \_\_\_\_\_  
Optional

EMPLOYER / SCHOOL \_\_\_\_\_  
Required if this is your basis of eligibility for a card

THE FOLLOWING PEOPLE HAVE PERMISSION TO CHECK OUT MATERIALS WITH MY CARD:

\_\_\_\_\_  
Optional

## APPLICANTS 17 YEARS OF AGE AND UNDER

### Parent or Legal Guardian Information:

NAME \_\_\_\_\_  
First Last

MAILING ADDRESS \_\_\_\_\_  
If different than above P.O. Box / Street Address City State Zip Code

PHONE ( ) \_\_\_\_\_ RELATION \_\_\_\_\_

**I accept full responsibility for all materials borrowed with this card.  
I agree to comply with all library rules and to report any changes of address.**

APPLICANT SIGNATURE \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_  
Required for applicants 13 years of age and under

## Library Staff Use

User ID: 2 3157 \_\_\_\_\_

Group ID:   
(Phone Number)

Date: \_\_\_\_\_

Staff Initials: \_\_\_\_\_