|  Library Card Registration rev 05/2018  |
| --- |
| Today’s Date:  |   Adult  Child | Computer Use:  Yes  No |
| Name (Last, First, M.I.): |
| Birth Date (MM/DD/YYYY):  |
| Primary Address: |
| City: | State: | ZIP Code: |
| Secondary Address: |
| City: | State: | ZIP Code: |
| Primary Phone:  | Secondary Phone:  | Other Phone: |
| E-mail:  *continued on other side* |

|  Library Card Registration rev 05/2018  |
| --- |
| Today’s Date:  |   Adult  Child | Computer Use:  Yes  No |
| Name (Last, First, M.I.): |
| Birth Date (MM/DD/YYYY):  |
| Primary Address: |
| City: | State: | ZIP Code: |
| Secondary Address |
| City: | State: | ZIP Code: |
| Day Phone:  | Evening Phone:  | Other Phone: |
| E-mail: *continued on other side* |

|  Library Card Registration rev 05/2018  |
| --- |
| Today’s Date:  |   Adult  Child | Computer Use:  Yes  No |
| Name (Last, First, M.I.): |
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| Primary Address: |
| City: | State: | ZIP Code: |
| Secondary Address: |
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| Primary Phone:  | Secondary Phone:  | Other Phone: |
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| Day Phone:  | Evening Phone:  | Other Phone: |
| E-mail: *continued on other side* |

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| ***I accept full responsibility for all use of this library card and for all charges associated with its use. I agree to abide by the library’s rules and regulations. I acknowledge that by providing an email address I agree to receive email from the library related to my account and library business.*** |
| Signature: |
| Signature of Guardian (if applicable): |
| Printed Name of Guardian: |
| ***For staff use only*** |
| Staff Initials:  | Library Card Number:  |  In System  Out of System |
| Residency:  | School District: | ID Verified: |

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