



Library Card Registration Form

You must bring this form to the library in person with the proper identification to complete your registration.

Last Name

First Name

Middle Initial

Street Address or P.O. Box

Apt.

City

County

State

ZIP Code

E-mail address: _____

(_____) _____ - _____
 Home Phone or Other Contact

____ / ____ / ____
 Date of Birth

Male

Female

I live: within a city's limits.
 (check one) in a township. Name of township _____

Conditions for Use:

1. I agree to abide by current and future library regulations.
2. If my account is collected through any court or recovery agency, costs levied by the court or agency shall be added. I understand and agree to these conditions.
3. Library assumes no liability for damage to patron's own equipment associated with the use of library materials.
4. **Parents, not library staff, are responsible for monitoring their children's selection of library materials.**

X _____

Signature (Parent or Guardian if applicant is under age 18)

Please complete this lower part if applicant is under age 18.

Parent/Guardian's First Name

Initial

Last Name

Address (if different from applicant)

State

ZIP Code

(_____) _____ - _____
 Home Phone or Contact Phone
 (if different from applicant)

Youth materials only

Internet authorized

Today's Date: _____ For Staff Use: Bar Code # _____ Staff Initials: _____