

STAFF USE ONLY

GROUP ID#

LIBRARY CARD APPLICATION FOR MINORS LIVING AT THE SAME ADDRESS

FIRST NAME

PREFERRED NAME

MIDDLE NAME

LAST NAME

(if different)

I want to receive text message reminders for this account.

I grant permission for this minor to have public computer access.

STAFF USE ONLY

PIN

BARCODE# 45937

JUV-SNO JUV-C-SNO YA-SNOW YAC-SNOW

BIRTHDATE mm/dd/yyyy

ALT. PHONE (opt.)

FIRST NAME

PREFERRED NAME

MIDDLE NAME

LAST NAME

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By signing this form, I have given my permission for the minor(s) listed on this application to receive library privileges.

I agree to be responsible for all materials borrowed with the card(s) and for all fines incurred.

I understand that I am taking responsibility to ensure that the minor(s) will follow all library rules of conduct, written or spoken, and that if the minor(s) choose(s) not to comply with these rules, library privileges may be suspended or revoked.

SIGNATURE

DATE