

# Library Card Application

(Photo I.D. and proof of address)



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

First Name (Preferred): \_\_\_\_\_

Legal Name (If Different): \_\_\_\_\_ M.I.: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Zip: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

County of Residence: \_\_\_\_\_

(If not Richland, Crawford, Iowa, Grant, or Lafayette, you must present a library card from your home library system)

\_\_\_ Township \_\_\_ Village \_\_\_ City of: \_\_\_\_\_

Email: \_\_\_\_\_

Would you like to receive our monthly email newsletter? Y / N

Phone: \_\_\_\_\_ Is this is a cell number? Y / N

Notification Preferences:

1. Notices (such as overdue reminders):

\_\_\_ Phone \_\_\_ Email

2. Items Ready for Pick-up:

\_\_\_ Phone \_\_\_ Email \_\_\_ Text (phone above)

\_\_\_\_\_  
Staff: write in barcode  
or affix label here

If Text, Name of Cellular Carrier: \_\_\_\_\_

DOB: \_\_\_\_\_ Staff: ID confirmed Y/N Initials \_\_\_\_\_  
(mm/dd/yyyy)

Signature of the applicant or juvenile applicant's Parent/Legal Guardian verifies their acceptance of library policies, including the Internet Use Policy, and financial responsibility for all use made of the library card issued to this applicant, and that the information herein is correct.

\_\_\_\_\_  
APPLICANT SIGNATURE (if under 16, PARENT/GUARDIAN Signature)

\_\_\_\_\_  
PARENT/GUARDIAN Printed Name

