Library Card Application Form

Date: _____

Applicant Information:

Name of Child:			
Date of Birth:			
Parent/Guardian Name:			
Address:			_
City:	_ State:	Zip:	
Phone Number:			-
Email:			

Agreement:

I, the parent/guardian of the above-named child, agree to take responsibility for any materials borrowed on this library card.

Signature:

Parent/Guardian Signature: _____

For Library Use Only:

Card Number: _____

Issued By: _____

Date Issued: _____