

ADULT REGISTRATION

PLEASE PRINT

Name: _____

Address: _____
Street city zip code

Phone number: _____ How do you wish to be notified of holds and or
overdue items (please circle or check one): Email Phone Text

Email address and/ or cell phone company: _____

Social Security or Driver's License number: _____

Birth date: _____

I have received a copy of the library Code of Conduct and the Internet Policy and agree to
abide by them.

Signature: _____

Date: _____

JUVENILE REGISTRATION

PLEASE PRINT

Child's Name: _____

Address: _____
Street city zip code

Phone number: _____ How do you wish to be notified of holds and or
overdue items (please circle or check one): Email Phone Text Message

Email address and/or cell phone company: _____

Parent or Guardian's Name: _____

Parent's Social Security or Driver's License number: _____

Child's birth date: _____

I have received a copy of the library Code of Conduct and the Internet Policy. I understand that I am respon-
sible for making sure this child follows the rules of the library. I agree to take responsibility for any materials
checked out on this account.

Signature: _____

Date: _____