

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 or Guardian's 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 responsible 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: _____