



Mercer University

Library Registration Form

Jack Tarver Library, Mercer University

- ☐ Alumni Card
- ☐ Community
- ☐ Family
- ☐ Reciprocal
- ☐ Medical
- ☐ Retired Faculty/Staff

- ☐ Aramark
- ☐ Emeriti/Visiting Scholar
- ☐ Government Documents
- ☐ Law
- ☐ Special Programs
- ☐ Student

Please complete the following information. Please note all information **MUST** be filled out for a card to be issued. ID must be shown for address verification.

Name _____
(Last) (First) (M.I.)

Local Address _____

City _____ State _____ Zip _____ County _____

Business or Home _____

Home Phone _____ Business Phone _____

E-mail _____

Year (Soph., Graduate, etc.) _____ Program (Music, CLA, etc.) _____

By submitting this application for a library card, I hereby agree to obey all the rules and regulations of this library. Any infractions of these rules can result in revocation of library privileges. I will give immediate notice of any change of address. When checking out items, the patron assumes responsibility for the items, including any fines or replacement fees for all damaged or lost items.

Signature:

Library staff only:

ALUMNI: Year of Graduation from Mercer _____
verified in Alumni Directory: _____

EMERITI/Retired Faculty Staff

Former Affiliation with Mercer University: _____ Year left: _____

FAMILY:

Mercer University Faculty or Staff Relative: _____
Mercer University Department: _____ Relationship: _____

ARAMARK:

Supervisor's Name and
number _____
Staff _____ Verification _____ Date _____

Call Leila Lineberger at ex. 2925 or Ed Davis at ex. 2926 for employee verification.

Staff Initials _____ Date _____

06/12/08