LIBRARY CARD APPLICATION

SOUTH CENTRAL LIBRARY SYSTEM

IDENTIFICATION REQUIRED:

4 Digit Pin # _____

- **Photo I.D.** (i.e. Driver's license, state I.D. card)
- **Proof of Current Address** (i.e. Driver's license, state I.D., recent mail, check book)

PATRON INFORMATION (please print):

Name: _____
             Last   First   Middle

Birthdate: ____ /____ /____   **Female   Male   Age Group**:   0-17   18-64   65+
             Month Day Year

Mailing Address: _____
                              Street, RR/Fire Number or P.O. Box   City or Village   State   Zip

County of Residence: _____   **Township**: _____

Residential Address: (Complete if different from mailing address)

_____
Street, RR/Fire Number or P.O. Box   City or Village   State   Zip

Home Phone: (____) _____   **Email Address**: _____

Business Phone: (____) _____ Extension: _____

I would prefer to be notified of my holds by: Email   Phone   Text Message

Library (or bookmobile stop) where I would prefer to pick up my holds: _____
                                                                                                                      (Home Agency)

ACCEPTANCE OF RESPONSIBILITY (Read carefully!)

- I will be responsible for all materials checked out on this card, including materials checked out by others with or without my consent, unless I have previously reported the loss of my card.
- I will report a lost or stolen card, or any change of personal information (name, address, phone, email), immediately.
- I will comply with all library rules and policies.
- I understand that there will be charges for overdue, lost, damaged and stolen library materials.
- I understand that the library provides access to a broad range of resources and that it is my responsibility to judge for myself and or my children or minor dependents what resources are appropriate for my/our personal use.

PATRON SIGNATURE:_____ **Date**: _____

FOR JUVENILES (AGE 0-13), PLEASE COMPLETE:
Parent or Legal Guardian Signature:_____
Please print Parent or Legal Guardian Name: _____

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FOR LIBRARY STAFF USE ONLY:
Send to: _____ **Home Agency:** _____   **Initial when ID checked:** _____
From: _____   **Photo ID:** _____
                                                                                                    Proof of Current Address:

Sending library check one:

☐ Patron has card with barcode # _____from_____   **New Registration** ☐
                                                                                                                           Address Change ☐
☐ Issue card with this barcode and mail to patron   **Name Change** ☐
(Staple barcode here)   **Lost Card** ☐
                                                                                                                           Renewal ☐

PIN assigned ☐ **P-STAT:**_____   **Special Expiration Date:** _____