REGISTRATION

Please Print	Today's Date:					
Name:	F:1	Middle	- Lord		7. /C. /III	
	FITST	тааге	Last		Jr./Sr./III	
Address:		Street Address/Apt. # (A	ddress Verification Re	equired)		
Places chacks	City	t Address 🖵 Tempo	State		Zip Code	
i lease check.	Termanem	Address 🗀 Tempo	rary Address			
Home Phone:			Type: _	Landline/Cell		
Second Phone	:		Type: _	Landline/Cell		
E-mail:				·		
		ices by text messagin				
 Mobile Phon	e: Carrier:					
□ I wish to	☐ I wish to receive text messages as my only form of library notice.					
Birthdate:	mm / dd / yy		customers und	er 18 years o	old)	
Parent/Guardi	an Name:			 Last		
Children 14 aı	nd older•	☐ School ID with d	ocument with ac			
By submitting n I will abide by I will notify the	ny registration, all Harford Coul e library immed	I accept responsibility nty Public Library polici liately. I agree to use ow, ask questions, and	for all materials of es. If any informo and enjoy Harford	borrowed on thation on this fo d County Publi	orm changes, c Library, be	

For Library Use Only

Barcode Number:					
Identificati	ion:				
Approved	☐ Yes	□ No			
ID Shown:					
Driver's Lic	ense No).			
MVA Pictur	e ID No				
Other MD S Picture ID	tate De	pts.			
☐ Recent	Utility	Bill			
☐ Military ID & Orders					
PIN:					
Gender 🖵	Male	☐ Female			
□ SAM □	Sta	ff Initials			
BTYPE:	Staj	jj imelus			
ADU	JUV	YAD			
SPC	GRS	PRC			
SCF	VSP	VAD			
VJU	VYA	RRD			
OSB	HOM	FAM			



Access • Information • Service
Anytime • Anywhere