

Library Card Application

Library Card Number 10000

Applicant must present photo identification that includes their name and current address. If the address on the ID is incorrect, we will accept a printed personal check, utility bill, mail, etc. as proof of address. Minor children must accompany a parent or legal guardian with proper identification.

PLEASE PRINT	Date		Male Fema	ale		
Name	First	Middle	Last	Suffix		
Street			Post Office	e Box		
City	State	Zip	School District			
Driver's license or state ID number Birth Date / /						
Email Address						
Phone () Carrier (for text notification)						
Please notify me by: E-mail Phone Text						
The library supports its patrons' rights to confidentiality as required by the Iowa Code.						
As per the Library Borrower Policy, I accept responsibility for monitoring all accounts listed on this application and agree to comply with library rules and procedures, paying all fines and fees as incurred, paying for all lost or damaged materials, providing immediate notice of change of contact information.						
Signature						
ADDITIONAL INFORMATION FOR APPLICANTS AGE 17 AND UNDER						
Parent/Guardian (l	Print)					
1. Child's Name: _	First	Middle	Last			
Male F	emale					
Birth Date /	/	<u>Library Ca</u>	rd #10000	_		
For office use only						

Staff Initials ___

2. Child's Name:First	Middle	Last			
Male Female					
Birth Date / /	Library Card	Library Card #10000			
3. Child's Name:First	Middle	Last			
Male Female					
Birth Date / /	Library Card #	Library Card #10000			
4. Child's Name:First	Middle	Last			
Male Female					
Birth Date / /	Library Card	Library Card #10000			
5. Child's Name:First	Middle	Last			
Male Female					
Birth Date / /	<u>Library Card</u>	Library Card #10000			
6. Child's Name:First	Middle	Last			
Male Female					
Birth Date / /	Library Card	Library Card #10000			