

Library Card Application

Please print when filling out this form.



First Name

Last Name

Birthdate (mm/dd/yyyy)

Street Address

City

Zip Code

Email Address

() -

Phone 1

() -

Phone 2

Parent(s)/Guardian(s) (if applicable)

Staff Use Only

eReceipt Option (circle one)

email text both none

Notification Options (circle one)

email mail text
phone 1 phone 2

Additional Text (circle one)

Yes No

Text Messaging Phone (circle one)

phone 1 phone 2

Wireless Carrier

Barcode Number

Patron Type (check list)

Registration Branch

Permitted Users (if applicable)