

## Library Card Registration Form

| Staff use only                 |  |  |  |  |  |
|--------------------------------|--|--|--|--|--|
| Card #                         |  |  |  |  |  |
| Pin # Staff Initials           |  |  |  |  |  |
| New Resident Computer Use Only |  |  |  |  |  |

|  |  | New Resident               | Compute       | er Use Only           |
|--|--|----------------------------|---------------|-----------------------|
| Child's Name:  | _  |                            |               |                       |
| Mr/Miss Last Name  | First Name   | Middle Name                |               | Jr, Sr, II, III, etc. |
| Gender: Male Female Pri  | mary Language:   | Date of Birth<br>Month     |               | /                     |
| Responsible Party:   |  |                            |               |                       |
| Mr/Miss Last Name<br>Ms/Mrs  | First Name   | Middle Name                |               | Jr, Sr, II, III, etc. |
| Address & Contact Information:   |  |                            |               |                       |
| House #/Street /PO Box   | City/Tov   | wn County                  | State         | ZIP                   |
| Secondary Address (if applicable):   |  |                            |               |                       |
| House #/Street /PO Box   | City/Tov   | wn County                  | State         | ZIP                   |
| Email address:   |  | We can                     | notify you fa | ster & save paper.    |
| ☐ Please contact me by email for r☐ Please sign me up to receive the   |  |                            |               |                       |
| Daytime Phone:   | Ever   | ning Phone:                |               |                       |
| Photo ID & Proof of Current Residence (must show MD Driver's License or other identi   | e:_<br>fying documents to Library staff men                    | mber)                      |               |                       |
| By signing below, I accept responsibil<br>All materials checked out on this librar<br>lost or stolen card information immed<br>Library Policy: A parent or guardian of | ry card; payment for overdue, iately; notifying the library of | address or contact informa |               |                       |
| Signature of Responsible Party   |  |                            | <br>Date      |                       |

Signature of Responsible Party