



LIBRARY CARD APPLICATION

FULL: 1 _____

TLN: 5 _____

PLEASE PRINT: (Information Will Be Confidential and is for Library Use Only)Name: _____
Last First Middle InitialMailing Address: _____
Number Street Apt./Suite City State Zip

E-mail Address: _____

Phone #: (_____) _____
(Area Code) ☐ Cell ☐ HomeDate of Birth: _____
mm/dd/yyyy

Driver's License # / State ID: _____

I will accept responsibility for all materials borrowed on this library card and for any charges that may accrue. I agree to abide by the rules and policies of the Dearborn Public Library.

Select Contact Preference(s)☐ Send Email Messages☐ Send Text Messages☐ Automated Telephone Messages

PIN

Suggested: Birthday mm/dd

I understand that access to any material or service is not restricted by age.Cardholder Signature: _____ Date: _____
mm/dd/yyyy**Complete section below if applicant is under age 18**

I hereby declare that:

- 1) I am the parent / legal guardian of the above named child; and
- 2) I accept full responsibility for return of library materials checked out by the above named child, as well as liability for payment of the child's overdue fines and damaged or lost materials; and
- 3) I give consent for the release of the child's library records to:

Print 1st Parent/Guardian Full Name: _____**Print 2nd Parent/Guardian Full Name:** _____**Signature Parent/Legal Guardian:** _____ **Date:** _____
mm/dd/yyyy

PARENT/LEGAL GUARDIAN FOR APPLICANTS UNDER 18

Release of Minor Child's Library Record

Public Act 188 of 1996 was signed into law to amend the Michigan Library Privacy Act. This Act allows the library to release library records of minor children, if we have received the written consent of the person or persons liable for any charges and for return of the child's library materials.

What this means to a Parent or Guardian:

When you ask to check your child's record, the library will require a picture ID for identification. If your request is by telephone, you will need to know the child's library card number and other identifying information.

FOR LIBRARY USE ONLY

(BType) Borrower Loan Type

_____ PNP (not paid)
_____ NR (paid)
_____ TLN (the library network)
_____ ST (staff)
_____ HB (homebound)

Stat Class

_____ RESident _____ NRHeights _____ NREmployee _____ NRStudent
_____ NRFamily _____ NRPaid _____ TLN Borrower _____ NRTaxpayer

Registered by _____ Date _____
Staff Signature mm/dd/yyyy