



LIBRARY CARD APPLICATION

FULL: 1 _____

TLN: 5 _____

PLEASE PRINT: (Information Will Be Confidential and is for Library Use Only)

Name: _____
Last _____ First _____ Middle Initial _____

Mailing Address: _____
Number _____ Street _____ Apt./Suite _____ City _____ State _____ Zip _____

E-mail Address: _____

Phone #: (_____)
(Area Code) Cell Home

Date of Birth: _____
mm/dd/yyyy

Driver's License # / State ID: _____

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**
- NRSStudent**
- NRFamily**
- NRPaid**
- TLN Borrower**
- NRTaxpayer**

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