

UNADILLA PUBLIC LIBRARY

APPLICATION FOR LIBRARY CARD—ADULT

Your library card allows you to access public library collections and other resources in the Four County Library System. Submitting this form and receiving the card means that you accept the responsibilities associated with its use. Please provide **current identification and proof of address**.

Library records that contain information about library users are confidential under NYS law.

Please print carefully...

Your Name

Last First Middle .

Mailing Address

Street or PO Box .

City State Zip Code .

Phone— #1) #2) .

E-mail Address .

I request permission to use the library.

I have read—and agree to comply with—its rules and regulations.

I will notify the library immediately if my card is lost or if I change my name and/or address.

Signature Date .

For Staff Use Only

Card # PIN ID Verified →

Type of Registration: New Change of Name/Address Lost or Stolen Card

Issued by Date

