

UNADILLA PUBLIC LIBRARY

APPLICATION FOR LIBRARY CARD—CHILD

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 Date of Birth .

City State Zip Code .

Phone— #1) #2) .

Parent's Full Name and E-mail Address .

Child:

I promise to take good care of all library materials. I promise to obey the rules of the library.

Signature Date .

Parent:

I am allowing my child to borrow materials from the library. I will be responsible for any damage, loss, or fines incurred by my child. I understand that I, not the library staff, am responsible for library materials and resources selected and/or used by my child.

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