

LIBRARY CARD APPLICATION

You will need to provide a Driver's License or a current photo identification with proof of address before your library card can be issued. If the ID is not current a piece of mail with the current address is acceptable. Your phone number will be verified. If you do not have a phone, please put down a number that we can get a message to.

Please Print

Today's Date _____

First Name _____		Last Name _____	
Address _____			
City _____	State _____	Zip Code _____	County _____
Phone - Home _____		Work _____	
Mobile _____		Mobile carrier _____	
E-mail _____		I live outside the city limits of a town (circle one)	
		Yes	No

Family Members that may use this account or have their own account. You will be responsible for any minors on this account.

	Check one	(staff to fill in)	
Last Name, First middle initial	CHILD ADULT	Card #	Bridges log on
1	<input type="checkbox"/>		
2	<input type="checkbox"/>		
3	<input type="checkbox"/>		
4	<input type="checkbox"/>		
5	<input type="checkbox"/>		
6	<input type="checkbox"/>		
7	<input type="checkbox"/>		

BORROWER'S or PARENT/GUARDIAN AGREEMENT Read Before Signing!

I agree to be responsible for all materials borrowed with this card and to pay all fines and fees associated with this account. If you choose to you may volunteer for your late fees as payment. Report the loss, theft, or abuse of my card immediately. I understand that I am responsible for all fines and fees and any items checked out on my card prior to being reported lost or stolen and to report changes in my account information. This is my only Library account from the Center Point Public Library. All patron information is confidential. It may, however, be used by the library or its representatives while attempting to collect money, material or equipment as set forth in these policies and approved by law. (Iowa Code 22.7(13))

By signing, I acknowledge I have received a copy of the policy overview, I understand that I am responsible for material borrowed and I understand that all policy is available for me to read.

Your Signature:

X _____ Date _____

FOR STAFF USE:	New Application _____	Update _____
Patron Report class _____	Staff initial _____	

Notes: