## **ORGANIZATION LIBRARY CARD APPLICATION**

## **IDENTIFICATION REQUIRED:**



- **Photo I.D.** (i.e. driver's license, state I.D. card)
- Proof of Authorization (letter on official letterhead from principal/head of organization)

## **ORGANIZATION INFORMATION (please print):**

(product product)	
Organization Identity	
Main Address Street, RR/Fire Number or P.O. Box	
Street, RR/Fire Number or P.O. Box	City State Zip
Main Phone () Email Address	
Primary Card user:	
Name	Title
Work Phone Work Ema	il
Secondary Contact:	
Name	Title
Work Phone Work Ema	il
Other Card User name(s)	
I would prefer to be notified of my holds by: [CHOOSE O	NE]
☐ Email (same day notification)	
☐ Text (next day notification, cell phone only)	
☐ Phone call (next day notification) Select one: ☐	Cell   Land line
☐ No hold notices	
I prefer to pick up my holds at:(Name of Like	
<ul> <li>ACCEPTANCE OF RESPONSIBILITY (Read carefully</li> <li>We will be responsible for all materials checked out on this consent, unless we have previously reported the loss of this</li> <li>We will report a lost or stolen card, or any change of information</li> <li>We will comply with all library rules and policies.</li> <li>We understand that there will be charges for lost, damaged.</li> </ul>	card, including materials checked out by others with or without our card. ation (name, address, phone, email) immediately.  missing parts, and/or stolen materials. ange of materials and that it is our responsibility to judge for ourselves
Primary User or Head of Organization:	
Signature	Date
(Please print name)	
· · · · · · · · · · · · · · · · · · ·	
FOR LIBRARY STAFF ONLY:	Staff initials/LIB verifying ID:
Type of registration:  New patron  Lost card  Address change  Renewal	PSTAT (Sort 1):
Send application to:	
Patron has been issued card with barcode	from

10/18