

## **Child's Library Card Application**

Complete this form to get a free Library card for a child under 13. Bring the completed application to any Library location. Parent/guardian signature is required, and the child must be present to pick up their card.

Child's Information		
Child's Last Name:	First Name:	Middle Name:
Child's Home Address:		Apartment Number:
Child's City/State:	Zi	p Code:
Child's Phone:		Child's Date of Birth:/
How do you want to be notified		Month Day Year
Email	TeleCirc (T	he Library's Telephone Circulation System)
(Optional) Preferred Language:	Simplified Chinese Somali	Spanish Vietnamese
	Parent/Guardian Inf (Fill in contact information if it is not t	
Last Name:	First Name:	Middle Name:
Home Address:		Apartment Number:
City/State:	Z	ip Code:
Phone: Date of Birth://		
Would you like to receive email	s about Library events and news:	
to contact me by phone and em (Please Check Box)	ail about my child's Library accou	s associated with its use. I give permission for you int. I verify that the information on this form is correct
who wish to guide their children		are happy to offer support to parents and guardians
Parent/Guardian Signature		Date: / /

Staff Use Only: Barcode #\_\_\_\_\_ Borrower #\_\_\_\_