County of SLO Public Libraries

LIBRARY CARD APPLICATION

PLEASE PRINT

Name
Last: | *First:* | *Middle Initial:*

Date of Birth: _____ / _____ / _____ (MM DD YYYY) Age Category: ☐ 0-12 years ☐ 13-17 ☐ 18 or older

Driver's License / Photo ID:
(Minor, give parent/guardian's identification)

Primary Phone: | Secondary Phone:

Email Address:

Main Address:

City: | State: | Zip Code:

Alternate Address:
(If different from above)

City: | State: | Zip Code:

Notification Preference(s) – *select all that apply*:

☐ Email
☐ Text Message – *charges from carrier may apply*
☐ Phone Message (when applicable)

Mobile Phone:

TERMS OF AGREEMENT

I agree to be responsible for materials borrowed with this card, for loss and damage of materials, and for fines and fees incurred. I understand that notices from the library regarding overdue items, fines or holds available are a courtesy. I will report a lost card promptly and understand that I am responsible for all items checked out on this card until I have reported the card lost or stolen. Abuse of these requirements may result in suspension of Library borrowing privileges and/or referral to a collection agency. By law, the Library protects the confidentiality of all borrower records (CA Government Code, Section 6267).

Applicant Signature: _____ Date: _____

Parent/Legal Guardian:
I understand that my child will have unrestricted access to all Library resources, including all electronic, print, and recorded materials. I understand that the Library provides access to the internet on its computers and that the Library assumes no responsibility for anyone's use of the internet at the Library. I understand it is the parent/guardian's responsibility to guide, control, and monitor a child's selection and use of Library materials and resources, including the internet. I agree to be responsible for all resources and materials used and borrowed with this card, for loss and damage of materials, and for fines and fees incurred.

Signature of Parent/Legal Guardian: _____ Date: _____

Printed name of Parent/Legal Guardian: _____

STAFF USE ONLY

Barcode:
22063

Patron Category:
☐ Juvenile ☐ Teen ☐ Adult ☐ Welcome

Address Verification:
☐ CDL ☐ Utility Bill ☐ Mail ☐ Other:

Branch/Staff: | Checked by: