

Romeo District Library Card Application

Welcome to the **Romeo District Library!** To get a library card, take this application and a driver's license (ask Library staff about alternatives) to the Circulation Desk at the Graubner Library or the Kezar Library.

If the applicant is under 18 years of age, a parent or legal guardian must also complete the back, show their driver's license and accompany the minor child. (Legal guardians must present legal guardianship papers at time of application),

Last Name: _____

First Name: _____ Middle Name: _____

Street Address (no P.O. Boxes): _____

City/Township: _____ ZIP Code: _____

Phone Numbers: _____ (Home) _____ (Cell) _____ (Work)

Driver's License Number: _____

Sex: Female Male

Date of Birth: _____

If you do not live in Bruce Township, Romeo, or Washington Township, please check with a staff member to learn about other options.

Pin Number:

- A password (pin number) allows you to access your library account from home. Please provide your number here:

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Notification Options (please choose one):

- E-mail: The Library's automated system can notify you by e-mail when you have items being held or if items are overdue, and will also notify you of upcoming programs and other activities.
PLEASE CONSIDER CHOOSING THIS OPTION.

E-mail address: _____

- Telephone _____ (preferred number)

Certification:

I certify the information on this application is correct. I accept responsibility for materials checked out on the library card issued from this application, assume liability for the payment of fines and fees incurred by the use of this card, and will give notice of a lost card or change of address. I agree to abide by the Library's Internet Use Policy.

Print Name: _____

Legal Signature: _____ Date: _____

Staff Use: Init.:	Card #:
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Parent/Legal Guardian

If the person listed on the front of this application is under the age of 18, a parent or legal guardian must complete the section below.

Last name (parent or guardian): _____ **First:** _____

Driver's License Number: _____

Address: _____

City: _____ **Zip Code:** _____

Phone Numbers: _____ (Home) _____ (Cell) _____ (Work)

Parent/Legal Guardian Certification:

- I certify the information on this application is correct and that I am the parent or legal guardian of the applicant.
- I accept responsibility for materials checked out on the library card issued from this application, and I assume liability for the payment of fines and fees incurred by the use of this card, and will give notice of a lost card or change of address.
- I accept responsibility for my child's use of any and all library materials, including the Internet. Any restriction on my child's library use is my responsibility.
 - [Check this box if you do NOT want your child to use the Internet at the Library.]
- I authorize the library to release information to me and to _____ about the applicant's library records.
- I agree to abide by the Library's Internet Use Policy.

Printed Name: _____

Legal Signature: _____ **Date:** _____

Witness (Library Staff): _____ **Date:** _____