

**LIBRARY CARD APPLICATION**



**LINKCAT libraries - SCLS**

**IDENTIFICATION REQUIRED:**

- **Photo I.D.** (i.e. Driver's license, state I.D. card)
- **Proof of Current Address** (i.e. Driver's license, state I.D., recent mail, checkbook)

**PATRON INFORMATION (please print):**

Name: \_\_\_\_\_

Last

First

Middle

Name on Photo ID (complete if different than name above): \_\_\_\_\_

Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age Group:  0-17  18-61  62+

Month Day Year

Mailing Address: \_\_\_\_\_

Street, RR/Fire Number or P.O. Box

City or Village

State

Zip

County of Residence: \_\_\_\_\_ Township: \_\_\_\_\_

Residential Address: (Complete if different from mailing address)

\_\_\_\_\_  
Street, RR/Fire Number or P.O. Box City or Village State Zip

Email \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_

HOLDS: I prefer to pick up my holds at: \_\_\_\_\_

(Name of Library or Bookmobile stop)

**MESSAGING PREFERENCES**

**HOLD NOTICES**

- Email (same day notification)
- Phone call (next day notification)
- Text (next day notification, via cell phone only)
- No hold notices

**PRE-OVERDUE NOTICES (2 DAYS PRIOR)**

- Email

**OVERDUE NOTICES** are a default for **all** patrons and will be delivered via email or printed and mailed.

**ACCEPTANCE OF RESPONSIBILITY (Read carefully!)**

- I will be responsible for all materials checked out on this card, including materials checked out by others with or without my consent, unless I have previously reported the loss of my card.
- I will report a lost or stolen card, or any change of personal information (name, address, phone, email), immediately.
- I will comply with all library rules and policies.
- I understand that there will be charges for lost, damaged and stolen library materials and may be overdue charges.
- I understand that the library provides access to a broad range of resources and that it is my responsibility to judge for myself and for my children or minor dependents, what resources are appropriate for my/our personal use.

**PATRON SIGNATURE** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FOR JUVENILES (AGE 0-15), PLEASE COMPLETE:**

Parent or Legal Guardian Signature \_\_\_\_\_

Please print Parent or Legal Guardian Name: \_\_\_\_\_

#####

**FOR LIBRARY STAFF USE ONLY:**

Type of registration:

- New patron  Address change
- Lost  Renewal
- Name Change (Former name \_\_\_\_\_)

Staff initials/LIB verifying ID: \_\_\_\_\_

Proof of current address

Patron Category: \_\_\_\_\_

PSTAT (Sort 1): \_\_\_\_\_

Photo ID type: \_\_\_\_\_

(optional) ID #: \_\_\_\_\_

Send application to library of residence: \_\_\_\_\_

Patron has been issued card with barcode \_\_\_\_\_ from \_\_\_\_\_.