

Lemont Public Library: Library Card Application

Last Name:

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First Name:

Middle Initial:

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Date of Birth: _____ PHONE: _____

Address: _____ Street, Drive, Avenue, Circle, Court

City: _____ Zip: _____ Phone: _____

Barcode: _____ Address Check Date: _____

NOTIFICATION PREFERENCE:

Email Text messaging Both Email & Text Phone

Text messaging: Cell Phone: _____ CELL PHONE PROVIDER: _____

Email: _____

Check this box if you **do not wish to receive** occasional emails containing library news and information.

Additional Family Accounts:

	Name	Date of Birth	Internet Usage (Y/N)	Adult 18 +Young Adult 11-17 Juvenile 10- 0	Barcode (staff entry)
1					
2					
3					
4					

I understand that I am **responsible for all materials checked out on all accounts attached to this library card application**, for all charges that may result from overdue items, lost items, or damaged items. I agree to comply with library policy regarding fines.

Signature: _____

Children Internet Usage: I give permission for my child/children, 8yrs -17yrs of age, to access the internet at the library. I understand that I am responsible for monitoring my child's internet usage. If my child is under the age of 8, I will have an adult who is registered for internet usage present to supervise my child.

Signature of Parent/LegalGuardian: _____

STAFF USE: <input type="checkbox"/> RECIPROCAL BORROWER <input type="checkbox"/> NON-RESIDENT(EXPIRES IN 1 YEAR) <input type="checkbox"/> BUSINESS (EXPIRES IN 3 YEARS) STAFF INITIALS: _____ DATE: _____
