



Lake County Public Library Application for Library Card

Date:

** Required*

Statement of Responsibility and Signature

I certify that the information I provide below is correct. I accept responsibility for all items borrowed using the card issued from this form. I agree to abide by library policies and procedures. I agree to pay all fines and fees charged to this account. I will notify the library immediately if the library card is lost or stolen or if I change my address. I am responsible for items selected by an applicant under age 18.

Signature of applicant or responsible

party for applicant under 18

X

*Last Name: <i>(please print)</i>			*First Name:		
*Middle Name:			*Maiden Name:		
*Street Address:		Apt. No.	*City		
*State:	*Zip:	*Area Code and Phone: ()		Email:	
<i>Mailing address (if different from above or if guardian address differs from child):</i>					
* I would like to receive notices by: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			*Password – 4 digits:		*Birth year:
Telephone <u>or</u> Email <u>or</u> TXT Mobile carrier:					
*Gender: <input type="checkbox"/> <input type="checkbox"/> Male Female		Responsible party: name and relationship (if applicant under 18) PRINT			
<i>For Property Owners Only</i> Name of Business (if applicable):					
Address:		City:		State:	Zip:
Area code and phone: ()					

(License/ID and or home library card)



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SPECIAL PERMISSIONS FOR CHILDREN

Computer/Internet Use (Must be signed by a parent or legal guardian)

_____ I take responsibility for the use of the Internet made by the child under 18 per the Internet Use Agreement.

Video Permission for Resident Children (Must be signed by a card-holding parent or legal guardian in good standing)

_____ I approve video/DVD borrowing for the child, _____ and agree to the following regulations:

- ⤴ I agree to be responsible for the videos borrowed by the minor.
- ⤴ I acknowledge that I am responsible for selecting the videos, regardless of cost, MPAA rating, etc., not library staff.
- ⤴ I agree to pay the standard overdue charges for the videos borrowed by the minor.
- ⤴ I agree to pay the replacement cost of videos that the minor loses or damages and acknowledge that this cost may vary up to \$500.00 per item.

Signature of Parent or Legal Guardian: _____

Printed Name: _____ Library Card No.: _____

For library use only

Barcode:	Home library card #: Card verified by home library: <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Checked for duplicate records <u>Check ID shown:</u> <input type="checkbox"/> Driver's license or photo ID <input type="checkbox"/> Utility bill/legal document postmarked within 30 days <input type="checkbox"/> School Visit <input type="checkbox"/> Tax papers <input type="checkbox"/> Guardianship papers <input type="checkbox"/> Other: _____	Check one: <input type="checkbox"/> Replacement card <input type="checkbox"/> Gold card Patron code: _____ Eligibility: _____ Stat class: _____ Staff member: _____ Branch: _____ Notes:

