

Holbrook Public Library

Library Card Application (CHILD) —PLEASE PRINT—

Last Name	First Name	Middle Name	Male or Female
Mailing Address			Apt. #
City	State	Zip Code	County Phone ()
Street Address			Email Address
City	State	Zip Code	County Phone ()

Child's Date of birth: Month/ Day/ Year/

Parent/Guardian Date of birth: Month/ Day/ Year/

Parent/Guardian Drivers License # : _____ Last 4 of SS#: _____

Child's Age (circle one): 0-13 14-17 18-64 65 and over

Statement of Responsibility

I agree to be responsible for material borrowed with this card, and for loss and damage of material charged upon it. I understand I am responsible for notifying the library in case of loss or theft of this card. Failure to do so will result in my being held liable for materials charged on this card and for any fines incurred on this card.

Child's Signature: _____

Parent/Guardian Signature: _____

Parent/Guardian Name (print): _____

FOR STAFF USE

Picture ID: _____ Proof of Residence: _____

Staff Initials: _____ Date: _____ Patron ID# _____