Pioneerland LIBRARY SYSTEM

APPLICATION FOR LIBRARY CARD
All information is kept confidential in compliance with MN Statute

STAFF USE ONLY
Barcode No:_____
Staff Initials:_____ LIB #_____
Date:_____

*** = REQUIRED INFORMATION**

***GENDER** ☐ **MALE** ☐ **FEMALE** ***BIRTH DATE** (M M D D Y Y Y Y)

***LAST NAME** ***FIRST NAME** ***MIDDLE NAME**

*Parent or Guardian's Information (Required for Juvenile Under 18)

***LAST NAME** ***FIRST NAME** ***MIDDLE NAME**

***CURRENT MAILING ADDRESS** ***STREET ADDRESS** (If different from mailing address)

***CITY** ***TOWNSHIP**

***STATE** ***ZIP CODE** ***HOME TELEPHONE NUMBER** **CELL PHONE NUMBER**

***MN DRIVER'S LICENSE NO/ ID NO.** _____

EMAIL ADDRESS _____ **RECEIVE NOTICES BY EMAIL?** ☐ **YES** ☐ **NO**

*Required if different from above

PERMANENT MAILING ADDRESS **CITY**

STATE **ZIP CODE** **CONTACT NUMBER**

- The person whose name appears on a library card is responsible for notifying the library if there are any changes to information above.
- The person, 18 and older, whose name appears on a library card is responsible for all materials charged out on the card.
- Adults who sign the registration form for minors are responsible for materials checked out on the minor's card and notification of any changes to the information above.
- A lost library card must be reported to a Pioneerland Library so that the card can be invalidated. All items checked out prior to the date the card is reported lost are still the responsibility of the patron.
- The Pioneerland Library System recognizes the possibility that any given item may offend some patrons. Responsibility for children's use of the library materials and computers rests with their parents or legal guardians.
- I agree to abide by current and future library regulations. If my account is collected through any court or collection agency, costs levied by the court and the attorney shall be added.

_____ _____

SIGNATURE **DATE**