**Library Card Registration**

**Name**

LAST NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FIRST NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MI:\_\_\_\_\_\_\_

**Address**

STREET:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TOWN:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_STATE:\_\_\_\_\_\_\_\_ZIP:\_\_\_\_\_\_\_\_

BIRTH DATE:\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_

PRIMARY PHONE: (\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_

EMAIL ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Email address required if you’d like to receive notices, (courtesy, auto-renew, overdue, etc)

How would you like to be notified when a hold is ready for pickup?

**▢** Email

**▢** Text message Mobile Number: (\_\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

 Mobile Carrier: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check here for permission to:

Yes No

\_\_\_ \_\_\_ Notify you by email of important events involving the library

\_\_\_ \_\_\_ I am interested in knowing more about the Friends of Edwards Library.

**SIGNATURE:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I agree to comply with the loan policy of the Edwards Public Library. Please request a copy of our loan policy from your librarian.

**IF UNDER 18, PARENT OR GUARDIAN MUST SIGN BELOW:**

I permit my child to borrow materials from the Edwards Public Library and realize that I am financially responsible for materials checked out on this card. I am also aware of the library’s policy that staff will not restrict materials in any format used or borrowed by my child and I accept responsibility to monitor my child’s use of these materials.

**SIGNATURE OF PARENT/GUARDIAN:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**