

## E.D. LOCKE PUBLIC LIBRARY

## **IDENTIFICATION REQUIRED:**

Photo I.D. (i.e. Driver's License, State I.D. card)

Proof of Current Address (i.e. Driver's License, State I.D., recent mail, check book)

PATRON INFORMATION (Please Print):				
Name:	First		Middle	
Name On Photo I.D. (if different from above):				
Last		First		
Birthdate: / / / Age Gro	oup: 0-17	18-61	62+	
Mailing Address:		0444	7:	
	City or Villag		- 1	
County of Residence:	Township:	if outside city/village limits		
Residential Address (if different from mailing address				
Street, RR/Fire Number or P.O. Box	City or Villag	e State	Zip	
Email:	Check for 2-	day pre-overdue no	otice (only via email)	
Phono: Coll (if differen	nt from formar),			
Phone: Cell (if different with area code	nt from former):	with area code		
I would prefer to be notified of my holds by (CHOOSE Email (same-day notification) Text (next-day notification, cell phone only)	EONE):			
I would prefer to pick up my holds at:		r Bookmobile Stop		
ACCEPTANCE OF RESPONSIBILITY (Read Carefully!) I will be responsible for all materials check out on this card, in previously reported the loss of my card. I will report a lost or stolen card, or any change of personal in I will comply with all library rules and policies. I understand that there will be charges for overdue, lost, dam I understand that the library provides access to a broad range children or minor dependents what resources are appropriate	focluding materials check out by formation (name, address, pho aged, and stolen library materi e of resources and that it is my	one, email) immediately. als.		
PATRON SIGNATURE:		DATE:		
FOR JUVENILES (AGE 0-15), PLEASE COMPLETE: Parent or Legal Guardian Signature: Please Print Parent or Legal Guardian Name:				
FOR LIBRARY STAFF ONLY:				
Type of Registration:				
Lost card		rrent address 🗌		
Name change (Former name				
Address change   Renewal				
Send application to library of residence:				
Patron has been issued card with barcode				