



# Library Card Application

Please print and bring completed form with acceptable photo identification and proof of address to the Wilcox Public Library.

Bar Code 21587000

\*Last Name: \_\_\_\_\_ \*First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

\*Mailing Address: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip code: \_\_\_\_\_

Secondary Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

\*Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Driver's License/State ID #: \_\_\_\_\_

\*Telephone: \_\_\_\_\_ or Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ @ \_\_\_\_\_

### Code of Conduct Agreement:

As a new library patron of the Wilcox Public Library, I understand these terms:

- I will treat library materials, furniture, facilities, and equipment with care.
- I will behave in a fashion that does not interfere with the duties of the library staff or comfort of other patrons.
- I will comply with all library rules and policies.

Patron Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### Complete this section for children under the age of 16

Last Name of Parent: \_\_\_\_\_ First Name of Parent: \_\_\_\_\_

❖ I certify that I am the custodial parent and/or legal guardian of this child. I understand that the library provides access to a broad range of materials and information. I am responsible for my child's selection of and use of said materials.

Parental Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### FOR LIBRARY STAFF ONLY:

Patron Type (select one)

- |                                   |   |                                       |
|-----------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Adult    | <input type="checkbox"/> Access           | <input type="checkbox"/> Non-Resident |
| <input type="checkbox"/> Juvenile | <input type="checkbox"/> Access In-County | <input type="checkbox"/> Temporary    |

Staff Initials: \_\_\_\_\_