



POYNETTE AREA PUBLIC LIBRARY CARD APPLICATION

IDENTIFICATION REQUIRED:

- **Photo I.D.** (e.g., Driver's license, state I.D. card)
- **Proof of Current Address** (e.g., Driver's license, state I.D., recent mail / utility bill)

PATRON INFORMATION (please print):

Name: _____
Last, First Middle

Birthdate: ____/____/____ Age Group (circle): 0-17, 18-61, 62+
Month Day Year

Mailing Address: _____
Street, RR/Fire Number or P.O. Box City or Village State Zip

County of Residence: _____ Township: _____

Residential Address: (* if different from mailing address) _____
Street, RR/Fire Number or P.O. Box City or Village State Zip

Email _____ Phone (_____) _____

HOLDS: I prefer to pick up my holds at Poynette Area Public Library.

MESSAGING PREFERENCES FOR HOLD NOTICES (circle): Email (same day notification), Phone call (next day notification), Text (next day notification, via cell phone only)

*** I authorize Poynette Area Public Library to allow (spouse, child, other) _____ to pick up my holds. I will be responsible for the materials this/these authorized patron(s) check out on my library card.**

ACCEPTANCE OF RESPONSIBILITY (Read carefully!)

- I will be responsible for all materials checked out on this card, including materials checked out by others with or without my consent, unless I have previously reported the loss of my card.
- I will report a lost or stolen card, or any change of personal information (name, address, phone, email), immediately.
- I will comply with all library rules and policies.
- I understand that there will be charges for lost, damaged and stolen library materials.
- I understand that the library provides access to a broad range of resources and that it is my responsibility to judge for myself and for my children or minor dependents, what resources are appropriate for my/our personal use.

PATRON SIGNATURE _____ Date: _____

FOR JUVENILES (AGE 0-17), PLEASE COMPLETE:

Parent or Legal Guardian Signature _____

Please print Parent or Legal Guardian Name _____

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FOR LIBRARY STAFF USE ONLY:

Type of registration: (circle)

- New patron
- Address change – staff checked proof of applicant's current address : _____
- Lost card (fee = \$1.00) _____ Please initial

___ Name change (former name _____)

___ Patron has been issued a card with barcode _____.