

Jefferson-Madison Regional Library Library Card Application

Applicant must present identification with name and current address. If out-of-state, there is a \$23.00 fee. **Please Print Clearly**

Last Name	First Name	Middle Initial
Mailing Address		Apt. #
City/State		Zip Code
Telephone ()	Birth date (mm/dd/yyyy)	SS# or Dr. Lic # (optional)
Sex M F	City or County of Residence	School
Your residential or permanent address if different from above.		
Street		
City/State/Zip Code		
E-mail address (Optional. Holds notices, overdue notices and courtesy notices will be sent by e-mail. Please be exact as e-mail is often case sensitive.)		
I agree to be responsible for all materials charged on my library card; to report a lost card at once; to observe library rules; to pay promptly all charges; and to notify the library of any name or address changes. Signature of Applicant:		
For Parent or Guardian of Minor Applicant (under 16)		
I acknowledge that this library card entitles my child to complete access to all library materials. I assume responsibility for library materials borrowed by this child from the library. Parent's Name (Print)		
Signature		
Staff Use Only		
Date	Initials	Barcode # 217430