



# Child Card Application

<b>For Staff Use Only:</b>
Barcode # _____
Pin # _____
Staff Initials _____

**PLEASE PRINT**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ Alternate Phone: ( ) \_\_\_\_\_

**Birth Information:** Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**Gender:**  Female  Male

**Ages**

- 0 – 6
- 7 – 14
- 15 – 17

**Ethnic Category**

- African American
- Asian

- Caucasian
- Hispanic
- Native American
- Other

**MAILING ADDRESS**

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**PERMANENT ADDRESS** (If different from Mailing Address)

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_

**I WOULD LIKE TO RECEIVE LIBRARY NOTIFICATION BY EMAIL**

Email address \_\_\_\_\_

**SIGNATURE OF PARENT/GUARDIAN FOR PERSONS 12 YEARS OF AGE AND UNDER**

- I have received a copy of the Library's Welcome brochure and the Parents Brochure.
- I agree to be responsible for all materials borrowed, and for all charges incurred for any overdue, lost, or damaged materials borrowed with this card.
- **I agree to notify the Library of changes in address, telephone number, and name, or if this card is lost or stolen.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE PRINT PARENT OR LEGAL GUARDIAN'S NAME:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

**I would like my child to have Internet Access at the library**  Yes  No

**Identification:** Proof of current address is required. (ID of parent or guardian if applicant is 12 or under)

Type of ID:  California Driver's License  California ID  Other

ID Number \_\_\_\_\_