

## LIBRARY CARD APPLICATION – 14 Years and Over

Personal identification, including name and home address will be requested by Library Staff.

Please Print

<b>Date:</b>		<b>Branch Location:</b>	
<b>Name of Applicant:</b>			
_____		_____	
Last	First	Middle	
<b>Address:</b>			
_____		_____	
Apt./Unit #	Street Number	Street Name	
_____		_____	
City	Province	Postal Code	
<b>Phone: ( ___ ) ___ - _____</b>		<b>Birthday (required):</b>	
<b>Other Phone: ( ___ ) ___ - _____</b>		Year	Month
		Day	
<b>How do you wish to receive notification of items placed on hold? (Choose one)</b>	<input type="checkbox"/> <b>Email</b>		
	Provide your email address:		
	_____ @ _____		
	<input type="checkbox"/> <b>Text Message</b>		
Provide your cell phone number (if different from above):			
( ___ ) ___ - _____			
<input type="checkbox"/> <b>Phone</b>			
Provide your phone number (if different from above):			
( ___ ) ___ - _____			
<b>Complete this section only if applying for an institutional library card:</b>			
_____		_____	
Organization / Institution / Community Group Name		Your Title	
_____		_____	
Apt./Unit #	Street Number	Street Name	
_____		_____	
City	Province	Postal Code	
_____		_____	
Supervisor / Director Name		Telephone	
_____		_____	
Signature of Applicant		Date	