

# Eldredge Public Library – Library Card Registration Form

## JUVENILE – YOUNG ADULT

**Please Print Clearly !!**

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

**Local Address** (Mailing Address)

\_\_\_\_\_ Post Office Box Street

\_\_\_\_\_ City/Town State Zip Code

**\*Local Telephone** \_\_\_\_\_

**Legal Address** (if different from above) (Mailing Address)

\_\_\_\_\_ Post Office Box Street

\_\_\_\_\_ City/Town State Zip Code

Telephone \_\_\_\_\_

I apply for the right to use the Library, and I agree to comply with all of its rules and regulations, and to give immediate notice of any change of address.

Signature \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Print Name \_\_\_\_\_

**Guardian Address** (if different from above)

\_\_\_\_\_ Post Office Box Street

\_\_\_\_\_ City/Town State Zip Code

**Guardian's Email** \_\_\_\_\_

Please contact me by **email only** when an item is ready for pick up.



**\*Library Identification** 11900 \_\_\_\_\_