COMMUNITY PATRON APPLICATION

Please print clearly when completing the application. You will need to show a driver's license and another library card for identification and will need to submit the name of a local reference. By signing this application form you are agreeing to be responsible for the safe and timely return of library materials and are agreeing to pay any late charges or replacement costs for lost and damaged materials. Applications will be processed 8am - 5pm Monday through Friday. Your card will be available for pick up the next business day. The card is valid for 1 year from issue date.

Application Date _____

First Name: _____Last Name: _____ MI:

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Home   _____ Cell
        _____ Work   _____ Email

If your child will also be using this card, please provide his/her name.

First Name: _____ MI: _____

We also require a reference. *This person must live at a different address than that listed above.*

First Name: _____ Last Name: _____ MI: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Home   _____ Cell
        _____ Work   _____ Email

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I wish to apply for a Thomas Library card and I agree to follow the guidelines listed above.

_____   _____
Applicant   Date

_____   _____
Witness   Date

Driver's License_____Library card_____

Witness, please check line that you have seen Driver's license and Library card.