PLEASE PRINT

WILLIAM JEANES MEMORIAL LIBRARY AND NICHOLAS AND ATHENA KARABOTS CENTER FOR LEARNING LIBRARY CARD APPLICATION

CLEAR FORM

CLIVI	ERT OR EEFINAVII VO EI		LEICHTION	Library card:	☐ Adult ☐ Juvenile	
(Preferred) Last Name Suf	fix First Name		Middle Initial	Date	of Birth	
Legal Name (if different than above)				☐ Yes ☐ No Use legal name for notices?		
Preferred Phone Number Secondary Phone Number Carrier (to receive text messages) Driver's License/State ID Number						
Street Address	Apt. Number City			ate Zip Cod	le Plus 4	
Preferred Mailing Address and Zip Code (if you use a P.O. Box)						
Email Address	Alter	rnate Email Address	te Email Address			
YOUR EMAIL ADDRESS will be used to notify you when reserved items are ready for pick-up, to send you a reminder that your items will be due soon, and to send your overdue notices. Using email saves the Library time and money. Notices will come from ***librarynotices@mclinc.org email addresses, and will vary depending on which library you visit. Please list these senders among your "approved senders" to prevent notices being blocked in your SPAM filter and check your email regularly so as not to miss library reminders.	Preferred method for notices: Email Phone Cell Phone Additional Text Message	Preferred format of receipts Paper copy eReceipt	I would like or to my reading order to keep items I checked (This list could be law enforcement with a warrant or	the list of dout. e accessed by personnel	Would you like to sign up for our newsletters? WOWbrary Monthly Adult Children Teens	
LIBRARY CONFIDENTIALITY: In accordance with the Pennsylvania Library Confidentiality law please note that information about items borrowed or requested may only be revealed to the library cardholder. [24 Pa. C.S.A § 9375 Privacy of Circulation Records]						
CHILDREN UNDER THE AGE OF 18 (If more space is needed, use the back of application						
(Preferred) Last Name, First Name, Middle Initial		/ / Date of Birth	Place card barcode here			
Legal Name (if different than above)			Use legal name for notices? ☐ Yes ☐ No			
(Preferred) Last Name, First Name, Middle Initial		/ / Date of Birth	Place card barcode here			
Legal Name (if different than above)			Use legal name for notices? ☐ Yes ☐ No			
(Preferred) Last Name, First Name, Middle Initial Legal Name (if different than above)		/ / Date of Birth	Place card barcode here Use legal name for notices? ☐ Yes ☐ No			
PLEASE READ AND SIGN I hereby apply to use the Library and promise to obey all its rules. I accept full responsibility for all materials checked out on and all charges associated with use of my account and the juvenile accounts listed on this application. For juvenile accounts I agree I am responsible to supervise selection of materials, and to ensure library rules are obeyed. I understand that juvenile accounts are subject to the confidentiality law cited above. For all accounts listed on this application, I agree to promptly pay all fines and damages charged, to give prompt notice of any changes in contact information, and immediately report loss/theft of account card(s). Your Signature						
FOR OFFICE USE ONLY						
Former Patron ID:	_Home Library:	Registered at:		Place card	barcode here	

Date: __/___ Statistical Class: _____ Patron Code: _____ Proof of residence / ID: _____ Registration taken by: _____