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LIBRARY CARD APPLICATION

LAST NAME:

FIRST NAME:

MI:

ADDRESS:

CITY:

ZIP CODE:

DATE OF BIRTH:

EMAIL:

PHONE:

AUTHORIZED TO PICK UP HOLDS:

NOTIFICATION OPTION (CIRCLE ONE):

EMAIL

PHONE CALL

TEXT MESSAGES

INTERNET & COMPUTER ACCESS?

YES

/

NO

E-RECEIPT?

YES

/

NO

By accepting this card from the White Oak Library District, I agree to abide by Library policies and procedures with regard to Library facilities, materials, fines, and services. If this card is lost, I am responsible for contacting the Library to avoid unauthorized charges. Adult cardholders (age 18 and older) may grant the Library permission to link their own borrower records to their family members or other designees.

Cardholder Signature:

Date:

ADDITIONAL CHILDREN'S ACCOUNTS

FIRST, MI, LAST NAME	DATE OF BIRTH	COMPUTER ACCESS?		BARCODE (STAFF USE)
		YES	NO	
		YES	NO	
		YES	NO	
		YES	NO	
		YES	NO	

I accept responsibility for my child's selection of materials, compliance with regulations, and payment of charges until they are 18 years old. The Library reserves the right to link patron accounts for parents and guardians of children under the age of 18.

Parent/Guardian Signature:

Date:

Staff Use Only

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Initials: _____ **Date:** _____ **CH** **LK** **RV** **Will Co. Website Verified** ☐

Previous Library Card # _____

Libby User? **YES** **NO** **Merged:** _____ / _____ / _____ **Initials:** _____

TGTM User? **YES** **NO** **Updated:** _____ / _____ / _____ **Initials:** _____

Picture ID = _____ **Proof of Address =** _____

Patron Code **Adult** **Juvenile** **YA**

(Circle) **Staff** **Outreach** **Reciprocal** **Non-Resident = \$** _____

Reciprocal

Home Library: _____ **Barcode:** _____ **Exp.** _____