

Seminole County Public Library System
 Application for Library Membership
PLEASE PRINT ALL INFORMATION CLEARLY

First Name	Middle Initial / Suffix (Jr., Sr. & etc.)	Last Name
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Phone:	Email:	Would you prefer phone <input type="checkbox"/> or email <input type="checkbox"/> notification of requested or overdue materials
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	Adult / Date of Birth Month <input type="text"/> <input type="text"/> Day <input type="text"/> <input type="text"/> Yr. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Adult 17+ <input type="checkbox"/> Teen 13-16 <input type="checkbox"/> Child 5-12 <input type="checkbox"/>

Street	APT #	City, State Zip
RESIDENTIAL ADDRESS (If different from your mailing address.)		Driver's License /State ID #

<i>If applicant is under 17 years of age, please complete the following:</i>			
Child/Minor's First Name	Child/Minor's Last Name	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	Child/Minor's Date of Birth Month <input type="text"/> <input type="text"/> Day <input type="text"/> <input type="text"/> Yr. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Address: (If different from above.)			
Street:	APT#	City:	Zip:
Internet access is allowed after completion of the Internet Safety training program or if parent/guardian waives participation.			
I want my child/minor to participate in the Internet Safety Training Program: Yes <input type="checkbox"/> No <input type="checkbox"/>			

PARENT/ LEGAL GUARDIAN RESPONSIBILITY: A parent or legal guardian must present photo identification, (Driver's License, Passport, State ID, etc.) and proof of residency to receive a library card for a child/minor. The parent / legal guardian of a child/minor is responsible for all overdue fines, fees, lost, or damaged materials on the child/minor's library card. Accounts with unpaid charges for fines, fees, lost and damaged books will be sent to a Collection Agency. Parent/ Legal Guardian's Initials: _____

Signing the library card indicates acceptance of responsibility for any fines, damage fees, and replacement costs for materials borrowed with the card.

Staff Use Only: BC # _____ Date Issued _____ Staff Initials _____ Parent's Record Checked: Renewal:
 Revised 4/2011 LLS-72