



# BALDWIN PUBLIC LIBRARY Library Card Application Form

Name: Last

## IDENTIFYING INFORMATION

Name

\_\_\_\_\_

Last

First

Middle

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Birthdate

\_\_\_\_\_  
Alternate ID (Allows you to log into your account online without typing your barcode.)

First

## CONTACT INFORMATION

Resident address (See reverse for employer address or property address.)

\_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

(\_\_\_\_)\_\_\_\_-\_\_\_\_  
Primary phone

(\_\_\_\_)\_\_\_\_-\_\_\_\_  
Secondary phone

Middle

\_\_\_\_\_  
Email address (Used to send hold notices, overdue notices, and courtesy reminders.)

## STATEMENT OF RESPONSIBILITY

I certify that the information on this form is correct. I agree to abide by the rules and regulations of the library and accept full responsibility for all materials checked out on this card (including all fines and damages charged). I will give notice of any change in my address or loss of my card.

I understand it is my responsibility to check my patron account and that Baldwin Public Library cannot be held responsible for notices that do not reach my address (mail or email).

\_\_\_\_\_  
Patron signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

