GLEN COVE PUBLIC LIBRARY APPLICATION FOR LIBRARY CARD

Date:	[PLEASE PRINT]			
Name:				
(last)	((first)	(middle initial)	
Address:			Phone:	
City:	S	tate:	Zip:	
E-Mail Address (for not	ifications related to your ac	count):		
Would you like to rece	ive emails about library new	vs and events? Y	Y/NAdultsTeensChild	ren
Have you ever had a lik	orary card anywhere in Nass	sau County? Y/	N If so, where?	
Borrower Responsibilit	ies:			
for overdue, lost or dat card or a change of add	maged materials charged or dress.	n my card, and to	ee to comply with its rules, to pay all fine o report promptly the loss or theft of the	
Applicant's Signature:				
Complete for Children	under the age of 18:			
Child's Date of Birth	//			
Parent/Guardian Name	e: (please print)			
Parent/Guardian Respo	onsibilities:			
for all materials selected	ed and borrowed by the mir	nor with this card	e library privileges. I agree to be responsi d and for all fines for overdue, lost or he loss or theft of the card or a change o	
Parent/Guardian Signa	ture:			
Staff Property Tax I			Pay Stub Other (specify)	
Use Processed By: Only Barcode Number: 2			Exp. Date:	