



Bell Memorial Public Library  
Application for Library Card

**Identification Required:** \_\_\_ Photo I.D. (Student I.D.) \_\_\_ Proof of Current Address (Drivers license, checkbook etc.)

**Patron Information:**

**Birthdate:** \_\_\_\_\_ **Gender:** \_\_\_\_\_

**Name (Last, First, MI)**

**Please Print:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**Township:** \_\_\_\_\_ **County:** \_\_\_\_\_

**Home Telephone #:** \_\_\_\_\_

**Alternate Telephone #:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**Acceptance of responsibility (Read Carefully)**

- I will be responsible for all materials checked out on this card and will notify the Library if my card is lost/stolen or if I have a change of address.
- I will comply with all library rules and policies and I understand that there will be charges for overdue, lost, damaged and stolen library materials.

**Signature:** \_\_\_\_\_

**Parent or Legal Guardian Name if under 16, Please Print:**

\_\_\_\_\_

**Parent or Legal Guardian Signature:**

\_\_\_\_\_

**LIBRARY USE ONLY – Type of Registration**

**Card Category**

<input type="checkbox"/> <b>New Patron</b>	<input type="checkbox"/> <b>Local Resident</b>	
<input type="checkbox"/> <b>Lost Card</b>	<input type="checkbox"/> <b>Valley Student</b>	
<input type="checkbox"/> <b>Address/Name Change</b>	<input type="checkbox"/> <b>Reciprocal</b>	<b>Proof of Current Address:</b> _____
<input type="checkbox"/> <b>Renewal</b>	<input type="checkbox"/> <b>Out of Area</b>	<b>Photo ID type:</b> _____

**Staff Initials:** \_\_\_\_\_