

## **BORROWER REGISTRATION FORM**

- Be sure to bring two forms of ID with you to verify your address (driver's license, metered mail, etc.) when you return this form. The library staff cannot process your registration form without seeing address verification.
- Borrowers must be present at the library to obtain a card.

Last Name:	First Name:	
Middle Name:		
Address:		
City:		Zip:
Phone Number: (		
E-mail Address:		
Library Account Password		
Would you like to be notified of the following by E-	-mail?	
$\hfill\Box$ Press releases/Classes offered through the library	□ MyJC Program Guide	
$\ \square$ Information on Friends of the Library	$\ \square$ Wowbrary (Newest items at y	our library/newsletter)
Would you like to be notified of holds by		
☐ Phone ☐ Email ☐ Text	/ Service Provider	
EMAIL AND TEXT NOTIFICATION WILL GENERATE COURTESY THEY MAY BE AUTO-RENEWED. NOTICES ABOUT OVERDUE I OR TEXT.	( NOTICES BEFORE ITEMS ARE DUE. ITEMS WILL BE SENT BY MAIL IF YO	IF ITEMS ARE ELIGIBLE, U DO NOT HAVE E-MAIL
PLEASE READ AND SIGN: I AGREE TO BE RESPONSIBLE FOR MATERIALS BORROWED WITH DAMAGED ITEMS, AS WELL AS LOSS OF MY CARD OR CHANGE OF FOR REPORTING ANY CHANGES OR LOSSES.		•
SIGNATURE:		
xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	xxxxxxxxxxxxxxxxx	xxxxxxxxxxxxxx
If under 18, please have this section filled out by y	our Adult Sponsor:	
ADULT SPONSOR NAME:		
Adult Sponsor Address & Phone Number (If Differe	,	
I AGREE TO BE RESPONSIBLE FOR MATERIALS BORROWED WITH INCLUDING CHARGES FOR LOST AND DAMAGED MATERIAL, AS VHOME, OR E-MAIL ADDRESS. I UNDERSTAND THAT THE LIBRARY CHOICE OF LIBRARY MATERIALS FROM EITHER THE ADULT OR FOR THE SELECTION OF MATERIALS MADE BY THIS MINOR.	I THIS CARD AND FOR ANY FEES INC WELL AS LOSS OF MY CARD OR CHAN Y DOES NOT ACCEPT RESPONSIBILITY CHILDREN'S COLLECTIONS. I ACCEPT	URRED, IGE OF PHONE NUMBER, / FOR THIS CHILD'S 「FULL RESPONSIBILITY
ADULT SPONSOR SIGNATURE:		
I ALLOW THIS CHILD TO ACCESS THE INTERNET: ☐ YES I ALLOW THIS CHILD TO CHECK OUT R-RATED, M-RATED,	, and Unrated Audiovisual Ma	TERIALS: YES NO
		Revised 7/21
STAFF USE ONLY		
SIGNATURE VERIFIED: ADDRESS VERIFIED:		
BARCODE: 27500		
STAFF MEMBER INITIALS:		
TYPE OF CARD:   RESIDENT   RECIPROCAL   PLAC	□ FEE □ COMPUTER USAGE □	TEMP - STUDENT/TEACHER
DRIVERS LICENSE NUMBER:		