

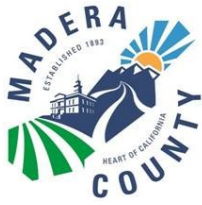
○ Chowchilla  
300 Kings Ave  
Chowchilla, CA 93610

○ Madera  
121 N G ST  
Madera, CA 93637

○ Madera Ranchos  
37398 Berkshire Dr.  
Madera, CA 93636

○ North Fork  
32908 RD 222  
North Fork, CA 93643

○ Oakhurst  
49044 Civic Circle  
Oakhurst, CA 93644



# LIBRARY CARD APPLICATION

A picture ID and proof of your address is required

## Who is this library card for?

1) Name (LAST) \_\_\_\_\_, (FIRST) \_\_\_\_\_ (M) \_\_\_\_\_ DOB \_\_\_\_\_

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1) Name (LAST) \_\_\_\_\_, (FIRST) \_\_\_\_\_ (M) \_\_\_\_\_ DOB \_\_\_\_\_

2) Mailing Address: \_\_\_\_\_ Apt: \_\_\_\_\_

3) City: \_\_\_\_\_ State \_\_\_\_\_

4) Zip Code: \_\_\_\_\_

5) E-mail Address: \_\_\_\_\_ @ \_\_\_\_\_

Notifications: Choose one

Home Phone  Cell phone  E-mail

If cell phone

SMS Overdue  SMS Holds  SMS General

6) Phone: Home \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

7) Select your own PIN # \_\_\_\_\_ If no preference will default to last 4 digits of your primary phone number

8) Driver's License Number: \_\_\_\_\_ Other: \_\_\_\_\_

\*Valid types of ID: Driver License, CA ID, Passport, Military ID, School ID [ 15 & over ], Consular ID

## If the name on line 1 is a child's, who is signing for them? Father, Mother or Legal Guardian

Name (LAST) \_\_\_\_\_, (FIRST) \_\_\_\_\_ (M) \_\_\_\_\_ DOB \_\_\_\_\_

## If line 2 is a PO BOX

Address: \_\_\_\_\_ City, State; \_\_\_\_\_ Zip: \_\_\_\_\_

Statement of Responsibility: By signing below, I agree to return all library materials on or before their due date. I accept financial responsibility for all transactions that take place on this card, and agree to pay for overdue fines and charges for damaged or lost items. I understand that unpaid charges which will be sent to a collection agency, and that collection fees will be added to the outstanding balance. I also agree to report promptly to the library, the loss of this card, or any changes to my name, address and telephone number.

A library card is like a credit card. Keep it safe!

SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

### STAFF USE ONLY

Staff Initials: \_\_\_\_\_ Barcode: \_\_\_\_\_

Date: \_\_\_\_\_ Barcode: \_\_\_\_\_

Barcode: \_\_\_\_\_

Barcode: \_\_\_\_\_