



KINGSTON PUBLIC LIBRARY Patron's last name: _____

Date: _____

APPLICATION FOR LIBRARY CARD, age 5 to 16

(please print clearly)

NAME: _____

ADDRESS: _____

City, State, ZIP: _____

E-MAIL ADDRESS: _____

*Email addresses will not be passed on to third parties.

Would you like a weekly email reminder of everything you have checked out?
(circle one) yes / no

PHONE NO: _____

Second phone number: _____

Child's birthdate: ____/____/____

Computer and internet use

If under 17 years old, applicant's Parent/Guardian must approve the child's use of the Public Library, including access to the library computers for Internet Use. The parent/Guardian is responsible for loss or damage to all library materials and/or any late charges incurred by the child.

_____ has permission to access the Internet: () yes () no

Parent/Guardian's signature: _____

Print parent/guardian name: _____

Date: _____

Acceptance of responsibility

***The parent or guardian signing up a child for a card must have a library card in good standing.

I, _____ AGREE TO

- OBEY ALL THE RULES AND REGULATIONS OF THE KINGSTON PUBLIC LIBRARY,
- TO RETURN ITEMS PROMPTLY,
- TO PAY PROMPTLY ALL FINES CHARGED AGAINST ME FOR ALL LATE ITEMS, INJURY, DAMAGE, LOSS OF BOOKS AND/OR OTHER LIBRARY MATERIALS,
- AND TO GIVE IMMEDIATE NOTICE OF ANY CHANGE OF ADDRESS OR PHONE NUMBER.

Print the name of any other parent/guardian who may have access to this child's account (i.e., list of books currently checked out, due dates, fines applied).

Parent/ guardian signature _____

Print name: _____

Library card number: _____

LIBRARY USE ONLY BELOW:

LIBRARY CARD # _____

Approved by: _____ Date: _____

Form revised and adopted 9/18/18