

Instructions

If you are 18 years or older, please provide photo ID and a proof of address. Forms of ID include a driver's license, passport or school ID. Proofs of address include a current driver's license, utility bill, vehicle registration or mail.

If you are under 18, a parent or legal guardian is responsible for your account and must sign this application and provide the above documentation. Children must be at least 5 years old to get a library card.

Persons residing outside of the library district may be required to pay a non-resident fee.

Name _____ Birth Date ____/____/____
Last First

Parent Name (if under 18) _____
Last First MI

Mailing Address _____ City _____ Zip _____

Residence Address _____ City _____ Zip _____

If different from mailing address above

Home Phone _____ Cell Phone _____

Check preferred

Email _____
 We only use your email to notify you of your account activity & monthly library updates. Leave blank to opt out.

Would you like to be signed up for text message reminders for library activities?
 (Standard text message rates may apply) Y N *Check all that apply* →

- Text Message Reminders*

 - Preschool Activities
 - Kid Activities
 - Tween/Teen Activities
 - Adult Activities

I, or my child, apply for the right to become a member of the library and agree to comply with all its rules. I assume full responsibility for all materials borrowed on my or my child's card, with or without my consent, and agree to promptly pay fines or fees charged. I will give immediate notice of change of address or loss of card. I understand that failure to comply with library rules may result in loss of borrower privileges. *Parents/Guardians are responsible for their children's choice of library materials.*

 Your Signature Date Parent/Guardian Signature (if under 18) Date

By signing below, I acknowledge and agree to abide by the Library's Internet & Computer Use Agreement printed on the back of this form. *Parents/Guardians are responsible for monitoring their children's computer and Internet use at the library.*

 Your Signature Date Parent/Guardian Signature (if under 18) Date

<p>Library Use Only</p> <p>Card Number: 2-1001- _____</p> <p>PIN: _____</p> <p>Probationary period ends: _____</p> <p>*Out of District Fee paid? Y N N/A</p> <p>New Patron Packet <input type="checkbox"/></p> <p>Staff Initials: _____ Date Entered: _____</p>	<p>Patron Category</p> <p><input type="checkbox"/> Child <input type="checkbox"/> Adult</p> <p><input type="checkbox"/> Out of District Child * <i>(Fee waived for OOD Lind, Ritzville & Washtucna students)</i> <input type="checkbox"/> Out of District Adult *</p> <p><input type="checkbox"/> Reciprocal Adult <input type="checkbox"/> Facility</p> <p><input type="checkbox"/> Reciprocal Child</p>	<p>Preferred Pickup Location</p> <p><input type="checkbox"/> Benge <input type="checkbox"/> Lind <input type="checkbox"/> Ritzville <input type="checkbox"/> Washtucna</p>
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