

TWINSBURG PUBLIC LIBRARY –CREATIVE LAB REGISTRATION

Please print clearly...

Name: _____

Library Card: _____ **OR** Government Issued ID Number: _____

Address: _____
(P.O. Boxes cannot be accepted for applications)

City: _____ State: _____ Zip Code: _____

Home Phone: _____ - _____ - _____ Work Phone _____ - _____ - _____

By signing this registration form, I agree:

- To abide by the Twinsburg Public Library Patron Behavior Policy, Computer Use Policy, and Creative Lab Procedures.
- I am responsible for all equipment that I use. I will pay any and all fees relating to any property/ equipment damage or loss.
- I am solely responsible for the content I create.

Failure to adhere to these policies and procedures may result in forfeiture of future use.

Signed: _____ **Date:** _____

This original will be kept on file and a free copy will be provided to the person signing upon request.

Staff Use Only

Library Card or Government Issue ID Verified By: _____ **Date** _____