

TWINSBURG PUBLIC LIBRARY - APPLICATION FOR A LIBRARY CARD

Applicant **must** present two documents with current address (e.g., Official mail, checkbook, or online bill) plus a photo ID. Otherwise, card will be mailed to the applicant's home address.

BEGIN PRINTING IN THE FIRST BOX, USING ONE BOX FOR EACH LETTER OR SPACE.

	fice Use Only Staff Initials Reading Cat
X Signature of parent/guardian (for applicants under 16 y	rears of age or under 18 without ID) Today's Date
	Today & Date
XSignature	Today's Date
library materials borrowed on said card.	
for all materials borrowed on this card. I also agree to pay	y any fines of other charges imposed for late return or mutilation of
☐ I have read and agree to observe all the Expected Patr	con Behavior/Rules established by the Library and will be responsible
Child's parent or guardian's name (for applicants unde	er the age of sixteen or under 18 without ID)
Date of Birth (sample 10/23/1963)	Driver's License Number
Home Phone Number (area code first)	Cell Phone (area code first)
O Bedford (1803) O Nordonia (7710)	Streetsboro (6709) Other
O Twinsburg (7716) O Aurora (6701) O	Hudson (7708) Solon (1828)
School District	H. J. (7700) O. S. J. (1920)
E-mail Address	
Email O Phor	ne O Text message
Zip Code Preferred method of	notification for reserved materials:
Apartment Number P.O. Box Number	City
Street Address	
Last Name	(Jr., Sr., III)
First Name (preferred)	MI
First Name (as it appears on your photo ID)	