

North Kansas City Public Library & High School Media Center Library Card Application

PLEASE PRINT

Applicants 16 years or older will need to present a valid photo ID. Please provide your name as it appears on your photo ID.

Last Name	First Name	Middle
Mailing Address		Apt. #
City	State	Zip Code
P.O. Box (if applicable)	Email address	
Telephone Number ()	Are you a North Kansas City High School student? <input type="checkbox"/> Yes <input type="checkbox"/> No	
PIN # _____ (Choose a 4-digit number) PIN numbers are required for reserving and renewing library items online, and for accessing your library record.	Date of Birth _____ / _____ / _____ Month Day Year Applicants under 13 years of age must have a parent or guardian complete the Parent/Guardian Agreement.	
How do you want to receive information about this account? (check one) <input type="checkbox"/> E-mail <input type="checkbox"/> Phone <input type="checkbox"/> Mail		
Would you like to receive the Library's monthly newsletter via email? <input type="checkbox"/> Yes <input type="checkbox"/> No		

BORROWER'S AGREEMENT

I agree to abide by library rules regarding behavior, public computer use and borrowing materials. I agree to pay for any loss of or damage to library materials and to pay for overdue fines accumulated on this card. I understand I am responsible for notifying the library in case of loss or theft of this card. Failure to do so will result in my being held liable for materials on this card and for fines incurred on the card. I also agree to inform the library of any changes in account information.

Signature

Date

PARENT/GUARDIAN AGREEMENT

As a parent or legal guardian of this borrower under the age of thirteen, I agree to be responsible for this borrower's selection and use of library materials. I agree to pay for any loss of or damage to library materials and to pay for overdue fines accumulated on this card. I understand I am responsible for notifying the Library in case of loss or theft of this card. Failure to do so will result in my being held liable for materials on this card and for fines incurred on the card. I also agree to inform the library of any changes in account information or my status of parent/guardian.

Signature

Date

STAFF USE ONLY Card number: 1001000 _____ Staff initials _____ Web card <input type="checkbox"/>
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