

Registration Application



**HUTCHINSON
PUBLIC LIBRARY**

PLEASE PRINT

To register for a library card, you will need to complete this form and provide current identification with name and address. The information on this form is solicited in order to maintain a complete list of library patrons, and will be used to record the location of library property and books. This information is not made available to agencies for mailings or solicitation.

Last name		First name		Middle name
Mailing address (please include apartment if applicable)			Home phone (____)____-____	
City	State	Zip Code	County	
Notification Method				
<input type="checkbox"/> Email		Email &Text <input type="checkbox"/>		Mail Only <input type="checkbox"/>
<input type="checkbox"/> Text Message: Cell number (____)____-____	Carrier or Provider			
Permanent address <i>if different from above</i> (required for out-of-town students, temporary)				
Mailing address (please include apartment if applicable)				
City		State	Zip Code	
Age range (Circle one) (CH) 1-12 (YA) 13-17 (A) 18-64 (S) 65 & over I agree to be responsible for material borrowed with this card, for all fines incurred and for loss and damage of material charged upon it.		Parents sign for ages 0-12 years I agree to be responsible for material borrowed with this card, for all fines incurred, and for loss and damage of material charged upon it. I accept responsibility for the selection of materials made by this person.		
_____ Signature		_____ Signature of Legal Parent or Guardian		
_____ Printed Name of Legal Parent or Guardian		_____ Printed Name of Legal Parent or Guardian		
Please provide the following information; it will be used for statistical purposes only:				
Sex (circle one) (M) Male (F) Female		Date of Birth ____/____/____ (mm) (dd) (yy)		