



## Borrower's Card Application for Age 12 and Younger

Parent or guardian, please read *Your Mobile Public Library Card*, and then complete this application. To establish a library account and receive a borrower's card for your child, please present the application at the checkout desk, along with a valid form of identification showing the child's current home address. Acceptable identification includes a recent bank statement, utility bill, rent receipt, or your driver's license.

Child's name: \_\_\_\_\_  
Last Name
First Name
Middle Initial

Please mark to indicate the location of your permanent address:

- |  |  |   |   |   |
|--|--|---|---|---|
| <input type="checkbox"/> Mobile (city) | <input type="checkbox"/> Mobile Co. (unincorporated areas) | <input type="checkbox"/> Baldwin Co.    | <input type="checkbox"/> Bayou La Batre     | <input type="checkbox"/> Chickasaw      |
| <input type="checkbox"/> Citronelle    | <input type="checkbox"/> Clarke Co.                        | <input type="checkbox"/> Conecuh Co.    | <input type="checkbox"/> Creola             | <input type="checkbox"/> Dauphin Island |
| <input type="checkbox"/> Escambia Co.  | <input type="checkbox"/> Monroe Co.                        | <input type="checkbox"/> Mount Vernon   | <input type="checkbox"/> Prichard           | <input type="checkbox"/> Satsuma        |
| <input type="checkbox"/> Saraland      | <input type="checkbox"/> Semmes                            | <input type="checkbox"/> Washington Co. | <input type="checkbox"/> Any other location |   |

Gender of child:  male  female  other      Child's birth date: \_\_\_\_\_ MM/DD/YYYY

Parent or guardian's name: \_\_\_\_\_  
First name
Middle initial
Last name

Addresses:

1) Email address for Library Notices: \_\_\_\_\_

2) Mailing address where you wish to receive library notices – permanent residence street address or post office box  
 Street Address and Apt. or Lot No.,  
 or P. O. Box: \_\_\_\_\_  
 City, State, Zip Code (plus 4): \_\_\_\_\_

3) Permanent Residence Street Address (If different from above)  
 Street Address and Apt. or Lot No.: \_\_\_\_\_  
 City, State, Zip Code (plus 4): \_\_\_\_\_

Home Phone: (      ) \_\_\_\_\_ Cell Phone: (      ) \_\_\_\_\_

I prefer to be notified by (*select one*):  Text  Email  Phone  Mail

**Parent or guardian, please read and sign the following agreement:**

I have received and reviewed information about borrowing privileges. I give permission for my child to have a library borrower's card. I am aware that the Library does not monitor a child's selection of materials, and I accept full responsibility for the selection of materials borrowed. I will abide by Library rules related to borrowing privileges and responsibilities. I understand that borrower cards are not transferable, and that only the child to whom this card is issued may present it to check out materials. I will promptly notify the Library of a change of address or loss of the card.

Date: \_\_\_\_\_ Signature of Parent or Guardian: \_\_\_\_\_

Library Use: 40181