

# WISSAHICKON VALLEY PUBLIC LIBRARY CARD APPLICATION

Adult      Juvenile

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Last Name                                      First Name                                      Middle Initial                                      Date of Birth

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Preferred Phone Number                      Secondary Phone Number                      To Opt In to receive text messages, provide cell # & carrier                      Carrier

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Street Address                                      Apt. Number                      City                                      State                                      Zip Code

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Preferred Mailing Address and Zip Code If Different From Above                      Driver's License/State ID Number

Email Address *Your email address will be used to send you courtesy reminders, overdue items and holds availability. Notices will come from [wvpllibrarynotices@mclinc.org](mailto:wvpllibrarynotices@mclinc.org) or [amblerlibrarynotices@mclinc.org](mailto:amblerlibrarynotices@mclinc.org). Please list these senders among your "approved senders" to prevent notices being blocked in your SPAM filter and check your email regularly so as not to miss library reminders.*

Notice options (for holds availability, courtesy reminders, overdues, etc.)

Email      Phone      Cell Phone

Additional Text Message

Check out receipts:  email  paper
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**LIBRARY CONFIDENTIALITY:**  
In accordance with the Pennsylvania Library Confidentiality law please note that information about items borrowed or requested may only be revealed to the library cardholder.  
PA. Title 24; Ch. 16 - Article IV; 24 P.S. § 4428 Library Circulation Records.

## PLEASE READ AND SIGN

I hereby apply to use the Library and promise to obey all its rules. I accept full responsibility for all materials checked out on this card and for all charges associated with its use. I agree to pay promptly all fines and damages charged to me, and to give prompt notice of any change in my address or loss/theft of my card.

Your Signature \_\_\_\_\_

## CHILDREN UNDER THE AGE OF 18

Last Name	First Name	Date of Birth	(Place card barcode here)
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____

## WITH REGARD TO CHILDREN UNDER THE AGE OF 18

Children under the age of 18 must have the signature of a parent, grandparent, or guardian. As the adult responsible for the child named above, I give permission for him/her to borrow materials from the library. I agree to pay all fines and damages charged to his/her card, to be responsible for supervising his/her selection of materials and to make sure he/she obeys library rules. I understand that children's cards are subject to the confidentiality law cited above.

\_\_\_\_\_  
Sign and Print Your Name                                      Address (If it is not the same as above)

## FOR LIBRARY USE ONLY

Former Patron ID: \_\_\_\_\_ Home Library: \_\_\_\_\_ Term: \_\_\_\_\_

Registered at: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Statistical Class: \_\_\_\_\_ Patron Code: \_\_\_\_\_ Eligible for Access:    Yes    No

Proof of residence / ID: \_\_\_\_\_ Registration taken by: \_\_\_\_\_ Date entered: \_\_\_\_/\_\_\_\_/\_\_\_\_