WISSAHICKON VALLEY PUBLIC LIBRARY CARD APPLICATION

직함: ^O Mr. ^O Miss ^O Mrs. ^O	Ms. \bigcirc Dr.				○성	인 〇청소년	
성(Last name)		이름(First name) 이		이니셜 _{(Mi}	// 니셜(Middle Initial) 생년월일		
전화번호 1 적어주세요.	전화번호 2		*문자 메세지를	받으시길 원하는	 - 경우,	핸드폰 번호와 Carrier를	
길 이름 _(street)	아파트	트호수(Apt.) 도시	(city)	·····································	tate)	우편번호(zip code)	
*우편으로 메일 발송시 원하시는 적어 주세요.	르면			운전면허/주번호 (Driver's License/State ID Number)			
Email (이메일) (Your email address will b wypllibrarynotices@mclinc.org or amblerlibr your SPAM filter and check your email regul 선호하는 통지방법(Preferred meth notices):	arynotices@mclinc.or arly so as not to miss l	g. Please list these sender ibrary reminders.	rs among your "approve	d senders" to preven LIBRA In accordance	t notices RY CO ce with t	NFIDENTIALITY: the Pennsylvania Library	
Email Phone Cel	Email OPhone Cell Phone (이메일) (전화) (핸드폰)		받는방법을 선택해수세요 abor O by email(이메일) Oby mail(우편) Circu		nfidentiality law please note that information out items borrowed or requested may only be revealed to the library cardholder. Fitle 24; Ch. 16 - Article IV; 24 P.S. § 4428 Library ulation Records. Request a copy from the librarian wat http://www.mclinc.org/RequestForRecords.htm		
I hereby apply to use the Library and for all charges associated with its us in my address or loss/theft of my car	se. I agree to pay p		ept full responsibili	ty for all materi	als che	ecked out on this card and	
Your Signature							
<u>미성년지</u> 성(Last Name)	· (CHILDREN U 이름(First Na	NDER THE AGE (ame)		Date of Birth)	(Pl	ace card barcode here)	
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Children under the age of 18 must hav permission for him/her to borrow mater his/her selection of materials and to mak	the signature of a table from the library	. I agree to pay all fin	or guardian. As the les and damages char	adult responsible rged to his/her car	d, to be	responsible for supervising	

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	e:Eligible for Access: \bigcirc Yes \bigcirc No			
Proof of residence / ID:	Registration taken by:	_Date entered: / /			