MCLINC LIBRARY CARD APPLICATION

Title:Mr Miss M	rs Ms Dr.	Gender: _	Male	F	Female	-	Adult	Juvenile	
Last Name	First Name				Mid	Middle Initial — / / Date of Birth			
Preferred Phone Number	Secondary Phone Nu	umber	То Ор	ot In to	receive	text mes	Carr sages, provi	rier de cell # & carrier	
Street Address	Apt. Numb	per City					State Zip	Code Plus 4	
Preferred Mailing Address and Zip Code						Driver's License/State ID Number			
Email Address			-	Munic	cipality				
Preferred method for notices: Email Phone Cell Phone Additional Text Message	Please check to opt-in: I prefer to receive e-receipts instead of paper receipts for library transactions I would like to receive program information and library news by email.				LIBRARY CONFIDENTIALITY: In accordance with the Pennsylvania Library Confidentiality law please note that infor- mation about items borrowed or requested may only be revealed to the library card- holder. [PA. Title 24; Ch. 16 - Article IV; 24 P.S. § 4428 Library Circulation Records. Request a copy from the librarian or view at http://				
I hereby apply to use the Library and for all charges associated with change in my address or loss/theft Your signature	and promise to obey all in its use. I agree to pay proof my card.	comptly all fine	ept full re	esponsi					
ast Name	EN UNDER THE AGE First Name		Gender Date of B			irth <i>write chi</i>		dren's barcode below	
			M _	F _	/	/			
Children under the age of 18 must have the to borrow materials from the library materials and to make sure he/she obeys	WITH REGARD TO the signature of a parent or y. I agree to pay all fines an	O CHILDREN guardian. As the nd damages chain	UNDER he adult reged to his	THE A sponsibl her car	GE OF e for the d, to be	18 child nar responsib	med above, I g le for supervi	sing his/her selection of	
Sign and Print Your Name	Address (If it is not the same as above								
		LIBRARY U					• • • • • • • • •		
Former Patron ID:	Home Library:		T	erm:					
Registered at: Dar	te:/Stati	istical Class:	Pa	tron Coc	de:		Eligible for A	access: [] Yes [] NO	
transfor regidence / ID:	n) agistration talear	1				Data antanadi	1	