STANISLAUS COUNTY LIBRARY CARD APPLICATION

PLEASE PRINT NEATLY AND FILL OUT FORM COMPLETELY.

NAME: ____________________________________________  Last Name  First Name  Middle Name

MAILING ADDRESS:  
Address  Apt./Space #  City  State  Zip Code  County

HOME ADDRESS: (if different from mailing address)  
(please print)
Street Address  Apt./Space #  City  State  Zip Code  County

E-MAIL ADDRESS: __________________________@__________________._______  Would you like to receive the library calendar by E-Mail?  YES / NO
If you supply an e-mail address, a reminder will be sent to you 3 days before your materials are due and you will receive hold notices. Your information will not be shared.

PHONE #: ______________________________________

BIRTH DATE: ___________________/_________________/______________  DRIVER’S LICENSE NUMBER: ____________________________________________
Month  Day  Year
(or California ID)

How did you hear about the library? (circle all that apply)

Friend/Family  School  Walk-in/Already Knew  
Newspaper  Phonebook  Radio  Theater Ad  TV

PLEASE READ AND SIGN:
I AGREE TO BE RESPONSIBLE FOR ALL MATERIALS BORROWED WITH THIS CARD AND FOR ALL FINES INCURRED, INCLUDING CHARGES FOR LATE, LOST AND DAMAGED MATERIALS.

I UNDERSTAND THAT I MUST FOLLOW ALL LIBRARY RULES OF BEHAVIOR, AND THAT IF I CHOOSE NOT TO COMPLY WITH THESE RULES, MY LIBRARY PRIVILEGES MAY BE SUSPENDED OR REVOKED.

SIGNATURE: ______________________________________

Barcode #: ______________________________________  Date: _______________  Initials: ____________

PARENT OR LEGAL GUARDIAN INFORMATION

PLEASE PRINT PARENT OR GUARDIAN INFORMATION IF APPLICANT IS UNDER 18 YEARS OF AGE.

NAME: ____________________________________________  Last Name  First Name  Middle Name

MAILING ADDRESS:  
Address  Apt./Space #  City  State  Zip Code  County

PHONE #: ______________________________________

BIRTH DATE: ___________________/_________________/______________  DRIVER’S LICENSE NUMBER: ____________________________________________
Month  Day  Year
(or California ID)

PLEASE READ AND SIGN:
I HAVE GIVEN PERMISSION FOR THE MINOR LISTED ON THIS APPLICATION TO RECEIVE LIBRARY PRIVILEGES. PARENTS ARE ENCOURAGED TO MONITOR THEIR CHILDREN’S LIBRARY USE.

I AGREE TO BE RESPONSIBLE FOR ALL MATERIALS BORROWED BY THE MINOR WITH THIS CARD AND FOR ALL FINES INCURRED, INCLUDING CHARGES FOR LATE, LOST AND DAMAGED MATERIALS.

I UNDERSTAND THAT I AM TAKING RESPONSIBILITY TO ENSURE THAT THE MINOR WILL FOLLOW ALL LIBRARY RULES OF BEHAVIOR, AND THAT IF HE OR SHE Chooses NOT TO COMPLY WITH THESE RULES, HIS/HER LIBRARY PRIVILEGES MAY BE SUSPENDED OR REVOKED.

SIGNATURE: ______________________________________

Barcode #: ______________________________________  Date: _______________  Initials: ____________
We are happy that you have chosen to apply for a Stanislaus County Library card. Please print neatly and complete the other side of this form, following the instructions below.

**IF YOU ARE 18 YEARS OF AGE OR OLDER:**

☑ Please fill out the application form completely.

☑ You must **show current government-issued photo identification** in order to receive a library card. The following forms of identification may be used:

- California Driver’s License or ID
- Driver’s License or ID issued by another state
- Consular Identification Card (CID)
- Passport

☑ You must **show verification of your current address**. Some examples are:
- Current utility bill in applicant’s name (postmarked within 30 days)
- Lease, rental agreement or rent receipt in applicant’s name showing address (dated within 30 days)
- Current Post Office Box receipt in applicant’s name
- Mail that has been sent to you at your current address (postmarked within 30 days)

**IF YOU ARE UNDER THE AGE OF 18:**

☑ Please fill out the top portion of the application with **your information**. The bottom section must be completed with **parent or legal guardian information**.

☑ **Current government-issued photo identification** must be shown to obtain a library card.

- Your parent or guardian may show his or her photo identification.
- Or, if you have identification, along with proof of your current address, then you may use your own.

  *In all cases, a parent/guardian signature is required.*

**IF YOU ARE VISITING STANISLAUS COUNTY:**

☑ If you are visiting Stanislaus County, or are residing here temporarily, you may apply for a Stanislaus County Library card. On your application, **please list both your local and permanent addresses.**

**LIBRARY CUSTOMERS, PLEASE NOTE:**

It is your responsibility to notify the library immediately if you change your name or address. There is no charge for changing information, and you may continue to use the same library card.

If you lose your library card, please notify the library immediately, to help prevent identity theft and unauthorized use of your library card account.