

OFFICE USE ONLY

Library Card Number: \_\_\_\_\_

Initials: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

### Elkader Public Library Card Application

Library cards are issued free to residents of the city area. The library participates in the State of Iowa Open Access Program which may allow free cards to residents of other communities in Iowa. Out of state cards cost \$25 per year.

To apply for a library card, please fill out the form below. **To safeguard patron privacy, we require photo I.D. and proof of current address.**

Please Print

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Street Address (if different from above): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_  
(Please circle: Home, Cell, Work, Other) (Please circle: Home, Cell, Work, Other)

Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_

**When we need to contact you, how do you prefer to be contacted?** *(Please circle method.)*

**Holds**      Phone      Email      Text Message

**Overdues**      Phone      Email      Text Message

**Date Due 3-Day Notice**      Email      Text Message

The person whose signature appears below or his/her guardian is responsible for all materials borrowed on this card. I agree to pay all fines or fees, abide by the policies of the library, promptly report the loss/theft of my library card, and will notify the library of changes in name or addresses.

Signature: \_\_\_\_\_

I authorize and assume responsibility for my child to borrow library materials and use computers.

Parent/Guardian Signature: \_\_\_\_\_