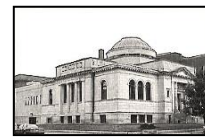


LIBRARY CARD APPLICATION



**WINONA
PUBLIC
LIBRARY**

IDENTIFICATION REQUIRED:

<p>Adults Photo ID (e.g. Driver's license, state I.D. card) Proof of current address (e.g. Driver's license, state I.D. card, recent mail, checkbook)</p>	<p>College Students Photo ID (e.g. Driver's license, state I.D. card) Proof of permanent address Driver's license (e.g. state I.D. card, recent mail, checkbook) School I.D.</p>	<p>Juvenile Ages 0-15, Parent or Guardian's Driver's license <u>and</u> signature Ages 16-18, Drivers' license <u>or</u> school I.D.</p>
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PATRON INFORMATION (PLEASE PRINT)

*Name _____
LAST FIRST MIDDLE INITIAL

*Local Address _____
Street Address Apt City State Zip

County _____ Birthdate ____ / ____ / ____

College Student? Yes / No

Permanent Address (if different from above). **College Student:** enter permanent address

Street Address Apt City State Zip

*Phone (____) _____ PIN _____ (please select a 4 digit PIN)

*Email Address _____

If you prefer to be notified by text check here
 Would you like to receive our monthly e-newsletter? Yes / No

FOR JUVENILES (AGE 0 - 15), PLEASE COMPLETE:

Parent or Legal Guardian Signature _____

Please Print Parent or Legal Guardian Name _____

Parent or Guardian's ID # _____ State _____

ACCEPTANCE OF RESPONSIBILITY (READ CAREFULLY!)

I agree to abide by Library rules, to pay for any loss of or damage to Library materials and to pay for overdue fines accumulated on this card. I am responsible for notifying the Library in case of loss or theft of this card. Failure to do so will result in my being held liable for materials and fines incurred on this card. I also agree to inform the Library of any street address or email changes.

Patron Signature: _____ Date: _____

FOR LIBRARY STAFF USE ONLY:

<p>Valid Driver's License/ID#: _____ State: _____</p> <p>ID expiration date: _____</p> <p> <input type="checkbox"/> Photo ID <input type="checkbox"/> Proof of Local Address <input type="checkbox"/> Non-Resident Card <input type="checkbox"/>\$10 /3 mo. <input type="checkbox"/>\$20 /6 mo. <input type="checkbox"/>\$40 /12 mo. <input checked="" type="checkbox"/> Other Family Members with Cards ● Previous Exp. Date ____ / ____ / ____ <input type="checkbox"/> Temporary Card (5 Item limit)* <input type="checkbox"/> Visitor Card (\$25 Deposit)* *duration of stay: ____ / ____ / ____ to ____ / ____ / ____ </p> <p><small>FT Approval</small></p> <p>Notes: _____</p>	<p>Initials & Date</p> <p>Action:</p> <p>New Registration <input type="checkbox"/></p> <p>Renewal <input type="checkbox"/></p> <p>Personal Information Change <input type="checkbox"/></p> <p>Report Lost Card <input type="checkbox"/></p> <p>Notification Change <input type="checkbox"/></p>
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*Barcode # _____ Place here