

<input type="checkbox"/> Borrower ID <input type="checkbox"/> Computer Use Policy Accepted <input type="checkbox"/> Video Use Policy Accepted	LIBRARY USE ONLY	[Patron Barcode]
Date of Birth _____ Name _____ <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <i>Last</i> <i>First</i> <i>Middle</i> </div> Parent or Guardian [<i>print</i>] _____ Home Phone (608) _____ \ Alternate (____) _____ CHECK PREFERRED PHONE CONTACT: <input type="checkbox"/> Home <input type="checkbox"/> Business <input type="checkbox"/> Cell <input type="checkbox"/> Message <p>Valid ID Required for all applicants <i>(Parent/Guardian must provide a Driver's License # or State ID # for unlicensed applicants under age 21.)</i></p> State _____ DL# or other valid ID _____ My residence is located in the County of _____, and in <div style="margin-left: 40px;"> Township of _____ <input type="checkbox"/> City of _____, or <input type="checkbox"/> Village of _____ </div> <p>(fill in <u>only one</u>)</p> Age: _____ Gender: Female _____ Male _____ Street/Residence Address _____ P O Box Address _____ City/State _____ Zip _____ Alternate Address _____ Alternate City/State _____ Zip _____ Email Address [<i>print</i>] _____ @ _____		
<p><u>Applicant assumes responsibility for all use made of this card.</u></p> <p>Adult Applicant or Parent/Guardian Signature required</p> <p>_____</p>		
Southwest Wisconsin Library System/1775 Fourth Street/Fennimore, WI 53809/608 822 3393 (July 2004) S-2		

Parental/Legal Guardian Consent Form for Library Cards for Minors

Child's Name: _____

I (print name), _____, am the child's biological or adoptive parent or the court appointed legal guardian for above named child.

I understand that I am legally and financially responsible for materials checked out to this Library card.

Signature _____
 Date: _____