**Cherokee County Public Library Card Application 13-18/Youth**

**Must provide a photo ID & a piece of mail confirming residence**

Office use only:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last First Middle

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Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name \_\_\_\_\_\_\_\_\_**

 Last First Middle

**Address (physical)**

 City State Zip Code

**P.O. Box Number** (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mobile Phone** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Home Phone**

**Email Address**

Contact Preference:

 Email Telephone Text Message

 Mobile Carrier:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Verizon, AT&T, etc.)

Driver License Number

School (If applicable)

Office use only:

Card Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_Initials of Staff issuing card

Position/Grade\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Alternate Contact:**

Name

Phone

Please Read Before Signing:

Financial responsibility for all materials borrowed with this card belongs to either the cardholder or the legal guardian of the cardholder. The responsible party must comply with the library code of conduct, rules, and policies and promptly notify the library of address change or notification of lost or stolen library cards.

The parent/guardian is responsible for monitoring the content of all materials their children borrow.

**By checking this box, the parent/guardian gives permission for the minor applicant to check out materials from the adult or young adult section of the library.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print Name (Parent/Guardian Applicant)**

**Parent/Guardian Signature**