

SQUAMISH PUBLIC LIBRARY -NEW PATRON REGISTRATION

Last Name _____ First Name _____ Middle Name _____
Birthdate _____ (MM, DD, YYYY)
Telephone #: Home _____

Required only for children under 14 years of age:

Guardian-Last Name _____ First Name _____
Guardian-Tel. #: Home _____

Post Office Box _____
Street Address _____
City, Province _____ Postal Code _____
E-mail address: _____
Signature _____

***I agree to be responsible for all materials borrowed on this card and for payment of any charges at all libraries at which it is registered:**

*** This card gives you borrowing privileges at this library and access to all InterLINK libraries. The card must be presented each time materials are borrowed.**

*** Report loss of card or change of contact information immediately.**

*** Guardians are responsible for Internet use by children and for choice of materials borrowed by children.**

SQUAMISH PUBLIC LIBRARY -NEW PATRON REGISTRATION

Last Name _____ First Name _____ Middle Name _____
Birthdate _____ (MM, DD, YYYY)
Telephone #: Home _____

Required only for children under 14 years of age:

Guardian-Last Name _____ First Name _____
Guardian-Tel. #: Home _____

Post Office Box _____
Street Address _____
City, Province _____ Postal Code _____
E-mail address: _____
Signature _____

***I agree to be responsible for all materials borrowed on this card and for payment of any charges at all libraries at which it is registered:**

*** This card gives you borrowing privileges at this library and access to all InterLINK libraries. The card must be presented each time materials are borrowed.**

*** Report loss of card or change of contact information immediately.**

*** Guardians are responsible for Internet use by children and for choice of materials borrowed by children.**