

L.D. FARGO PUBLIC LIBRARY CARD APPLICATION

ALL INFORMATION IS CONFIDENTIAL. PATRON PRIVACY IS PROTECTED PER WISCONSIN STATUTE CHAPTER 43.30

PLEASE PRINT

Last Name _____ First Name _____ Middle Name _____

Mailing Address _____ Apt. # _____

City _____ State _____ Zip _____

Phone # (_____) _____ County _____ Municipality _____

Birthdate ____/____/____ Check: Male Female

Create a Password/Pin _____

The library does not send any reminder notices by postal mail.

How would you like to be notified? Choose **ONE** option only.

Phone (holds notification only-you will **not** receive any due date or overdue notices)

Email (holds, upcoming due dates, overdue notices).
Email Address _____@_____

Text message (holds, upcoming due dates, overdue notices).
Cell Number (_____) _____ Carrier _____

Email and text message (please provide email and cell number information above)

Do you wish to link your library card account with a family member's? Yes No
Family member's name _____

Please read and sign below:

Patrons may borrow any circulation item in CAFÉ collections. Cardholders are responsible for: 1) Following all L.D. Fargo Public Library rules & policies. 2) Providing their library card when checking-out materials. 3) All costs & fees for lost or damaged materials. 4) All fines for late returns. 5) Replacing lost cards (\$1.00).

- *I agree to be responsible for all items borrowed with the library card issued in the above name, including items borrowed with it by others with or without my consent unless I have previously reported the loss of my card. I promise to comply with all library rules and policies both present and future, and to give prompt notice of change of address or loss of library card.*

- **Fines = \$0.05 per for all children's and \$0.10 for all adult items except for = \$1.00 DVDs**
- **All items circulate for 3 weeks except for DVD (1 week) and New Adult Books (2 weeks).**

Parent/guardians are also responsible for the selection and return of all materials borrowed by their minor children (<18 yrs).
By signing this application, patron acknowledges that all information is correct and that they understand these rules.

Signature of applicant X _____ Date _____

Signature of parent/guardian X _____ Date _____

Café Card Barcode _____

Staff Initials _____

3/29/2018

