



Waterville Public Library Card Application

A library card allows you to borrow materials from the library and access to associated resources, from online references, to eBooks, to special collections like snowshoes, and more. The card is for your identification and is not transferable. Please complete this form and present it with current identification.

This may include a license, piece of mail, or other identification with your name and address listed.

Library records are confidential under NYS law.

Title please circle: Mr Mrs Miss Ms

Pronoun please circle: She/her/hers He/him/his They/them/theirs

First Name: _____

Preferred Name Optional. This is the name that will show on your receipt, and may be a nickname or chosen name. Your legal name must be listed as First Name. _____

Middle Initial: _____

Last Name: _____

Date of Birth month/day/year ____/____/____

Mailing Address:

Street: _____

Apt. **Box** **Lot**

City: _____

Town/Village: _____

County: _____

State: _____ **Zip Code:** _____

Primary Phone: _____

Secondary Phone: _____

Email Notifications can be added to your account to alert you of holds, upcoming due dates and overdue dates. To add an email address, staff can assist you in opening your account at www.midYork.org or you can update your account online at any time. The pin is the last four digits of your primary phone, until changed.

→ **Turn to Reverse Side for Required Agreement and/or Youth 17 & Under**

**To Be Completed for Youth 17 & Under.
Adult borrowers can skip to the agreement below**

Parent/Legal Caregiver First Name: _____

Middle Initial: _____

Last Name: _____

Mailing Address: *If different from above*

Street: _____

Apt. _____ **Box** _____ **Lot** _____

City: _____

Town/Village: _____

County: _____

State: _____ **Zip Code:** _____

Primary Phone: _____

Secondary Phone: _____

Library Card Agreement. Please read carefully:

I (We- legal caregiver and child) agree to observe the library's rules and policies (posted at watervillepl.org and available in house) and will be responsible for all materials borrowed on my card. I agree to pay any charges imposed for the loss or damage of library materials. I will notify the library if my card is lost, or if I change my name, address, or phone number. I will not allow any other person to use my card.

Signature of Borrower: _____ **Date:** _____

Signature of Parent/Guardian (if youth younger than 17): _____