

Winding Rivers Library System: Borrower Registration

Name: Last _____ **First** _____ **M.I.** _____

Street/PO: _____ **City:** _____

State: _____ **Zip:** _____ **Township:** _____ **County:** _____

Phone: _____ **Email:** _____

Birth Date: ___/___/___ **Contact Info/ Alt. Address:** _____

ID# _____ **(Parents must provide their ID# for child)**

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, and to give prompt notice of change of address or loss of the card.

Signature of Applicant: _____ **Date** _____

Signature of Parent: _____ **Date** _____

FOR LIBRARY USE: WRLS Barcode # _____ **Gender: F** ___; **M** ___

Issuing Library/Local #/Note _____