LIBRARY CARD REGISTRATION	KANAWHA COUNTY LIBRARIES	ATTACH NEW BARCODE # HERE
DATE ENTERED	**STAFF INITIALS**	**PREVIOUS USER BARCODE**

Date_____ New Registration ☐ Replacement ☐ ($1.00 fee) Name/Address Change ☐

Name_____ _____ _____ _____
Last First Middle Jr., Sr., III, IV

Social Security #_____ Birth Date _____/_____/_____

Male ☐ Female ☐ Bookmobile Stop_____

Mailing Address Information:

Street _____County_____

City_____State_____Zip Code_____

Home Phone ( )_____ Work Phone ( ) _____

If you want to be notified by email (about overdues, holds to be picked up, etc.) please print email address here:_____

Alternate Address: (Use if above address is a P.O. Box, if permanent address/phone is other than the one listed above, or if parent or legal guardian's address is not the same)

Street_____City_____State_____

Zip Code_____Home Phone ( )_____Work Phone ( )_____

I agree to be responsible for all library materials checked out on this card. I am aware that the public library provides uncensored access to a broad range of materials and information and that overdue collection fees may be charged.

Signature required_____

Parent or legal guardian must sign for a child 0 through 13 years.

Print your name below if you are signing for a child 0 through 13 years.

_____ _____ _____ _____
Last First Middle Jr., Sr., III, IV

☐ ***Yes, I would like to be added to your mailing list for the library's newsletter.***