**ROSEVILLE PUBLIC LIBRARY**

DATE: \_

CARD #: \_\_\_

STAFF INITIALS:

**LIBRARY CARD APPLICATION – Minors under 18**

**(TO BE COMPLETED BY A PARENT OR LEGAL GUARDIAN)**

First Name: Middle Name:

Last Name:

Pin #: Birth Date:

Gender: M □ F □ Phone #:

Address: Apt. or Lot #:

City or Township: Zip Code:

Email Address:

**My parent or legal guardian gives the library permission to send email messages to the address above regarding upcoming library programs and events. YES NO**

**My parent or legal guardian wishes to be notified of holds, overdue materials or bills by:**

**Phone Email Text**

Mobile Phone # for Text Notification: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Your phone service may charge for these messages)*

When I write my name on this form, I promise to take good care of library materials and follow the rules of the library. My parent or legal guardian is responsible for all materials checked out on my card and all bills until I am 18 years old. When I am 18 years old, I will be responsible for any materials checked out on my card and unpaid bills for materials checked out when I was a minor. My parent’s or legal guardian’s card and the cards of other minors in the family may be blocked if my card is blocked to bills. By giving me access to my library card number and PIN, my parent or legal guardian is allowing me to access the Internet in the library.

**Signature (minor):**

**I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (parent or legal guardian),** am signing on behalf of the minor child who is under the age of eighteen. I represent that I am the parent or legal guardian and have authority to sign this application. I accept responsibility for the payment of overdue fines, the return of materials in good condition and any fines or fees that may be charged to the minor child’s library card. By providing a PIN, I understand that I am permitting the minor child to have unfiltered access to the Internet. On behalf of the minor child, I understand that I am responsible for monitoring the minor’s use of the Internet and wireless Internet.

As Parent/Legal Guardian, I allow \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to discuss this account on my child’s behalf.

**Parent or Legal Guardian’s Name:**

**Parent or Legal Guardian’s Birth Date:**

**Parent or Legal Guardian’s DL# or State ID#:**

**Other Form of Acceptable Identification shown: \_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature (parent/legal guardian):**