Petoskey District Library – Library Card Registration Form

Last Name:	**First Name:**	**Middle Initial:**	**Create a 4-digit PIN: ___ ___ ___ ___**
Preferred Name (if different than above):	**Birthdate: / /**	**Phone: ( )**	
Street Address:		**City/State/Zip:**	
Email:		**How would you like to receive library notices?** Text Message **OR** Email	

Library Card Agreement: I agree to be responsible for library materials, fines, damaged and lost items.
If you give consent for other family members to view and access my account.

List names: _____

Signature:_____ **Date:** _____

Office use only: PETPUB PETTWN PETTEMP PETNR6MOS PETNONRES PETEDU PETEMPLOY **Staff Initials:**

Cat 1: Bear Creek Little Traverse Petoskey Springvale Resort Other:

APPLICANTS UNDER AGE 13, PARENT/LEGAL GUARDIAN MUST INITIAL AND SIGN AGREEMENT BELOW

I agree to be responsible for the library materials checked out on the card of the minor child named above. I will pay for fines and lost materials._____**(Initials)**

I give consent for this child's library records to be released to me if items are overdue or lost._____**(Initials)**

I give consent for my child to use the Internet in the Library with the understanding that the staff will attempt to monitor internet use for those under 18 and will make every effort to help my child make informed decisions about the use of internet resources._____**(Initials)**

Signature:_____ **Print name:** _____

Relationship to child: _____