



Library Card Application

Juvenile Form (Grade 8 and Under)

Personal identification demonstrating name and home address of parent or legal guardian will be requested by Library Staff. Photos of identification are not acceptable as proof of ID.

Please Print

Name _____ (_____)
Last First Middle Preferred

Address _____
Apt./Unit # Street Number Street Name
City Province Postal Code

Primary Phone (_____)
Secondary Phone (_____) **School** _____

Birthday _____
DD/MM/YR

Email Address _____ @ _____

I agree to receive hold notifications, courtesy due date reminders and occasional library correspondence at this email address. I can remove it at any time.

Alternate Address _____
Apt./Unit # Street Number Street Name
City Province Postal Code

I would like my child to have their own library card. As Parent/Legal Guardian, I agree that I am responsible for all use of the library card. I agree to follow the rules and regulations of the Woodstock Public Library; care for all of the material borrowed on the card; pay for all lost or damaged materials; inform the library if the card is lost or stolen and/or if the name or contact information changes. I am responsible for the use of this card.

Parent/Guardian's Name (please print) Parent/Guardian's Signature

Barcode 2210500	Resident / Non-Resident	Date	Staff Initials
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This information is collected under the authority of the Public Libraries Act (R.S.O. 1990, c. P.44) for the purpose of maintaining control of circulating library materials. The information on this form is subject to the Municipal Freedom of Information and Protection of Privacy Act (R.S.O. 1990 c. M.56).