



# Barberton Public Library Card Application

602 W. Park Ave., Barberton, OH 44203

www.barbertonlibrary.org

330-745-1194



## Applicant Information: Please print.

Last Name	First Name	Preferred Name	Middle
Home Address (No P.O. Boxes)			Apt. #
City	State	ZIP	
Phone	Email		
Date of Birth (MM/DD/YYYY)	Ohio ID #		

## Communication Preferences: Please select one per question.

I would like to receive overdue notices via:    Phone    Email

I would like to receive courtesy notices via:    Phone    Email    Text

## Cardholder Agreement & Signature

I agree to observe all rules established by the Library, and will be responsible for all materials borrowed on my card and any charges incurred on my card. I will notify the Library immediately if my library card is lost or stolen, or if any of this information changes. I understand that I am accepting financial responsibility for the cost of materials borrowed on my card. I understand that the Library is only collecting personal information that is required to obtain a library card and that such information is accessible by all CLEVNET member libraries.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Parent or Legal Guardian Information, Agreement and Signature: Required for applicants age 15 & under.

Last Name	First Name	Preferred Name	Middle
Date of Birth (MM/DD/YYYY)	Ohio ID #		

As a parent or legal guardian, I understand that I am accepting financial responsibility for the cost of materials borrowed by my child as well as any charges incurred. I understand that the Library is only collecting personal information about my child that is required to obtain a library card and that such information is accessible by all CLEVNET member libraries. I will notify the Library immediately if the card is lost or stolen, or if any of this information changes.

Parent or  
Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Additional Information on Reverse**



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## Authorized Users: Optional

Cardholders may grant permission for designated individuals to use their library card to check out materials, pick up reserved materials, and pay fees. The designee will be asked to present the library card associated with the cardholder's account and may be asked to provide photo identification when checking out materials. Cardholders who allow others to use their library card are financially responsible for any materials borrowed by the designee. Because library records are private, designated individuals will not be given information about the cardholder's account that they are using, though parents or legal guardians may be granted access to the account information of their child provided they are listed as the parent or guardian on the account.

I authorize the following individuals to use my library card:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Teacher Information, Agreement, and Signature: Required for Teacher Card applicants.

School or Organization Name		Room #
Address	City, State	Zip
Office Phone	School Email	

Teacher cards are available to individuals who function as an educator in a public, private, or homeschool setting, a caregiver at a commercial or private preschool or daycare, or a group leader in a youth organization or educational entity. Regular borrowing policies generally apply, though some materials owned by the Barberton Public Library will qualify for extended loan periods.

I understand that materials borrowed using a teacher card should be for classroom use only and not for personal use, and that I am financially responsible for any materials borrowed on my teacher card.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## For Library Use: Please Do Not Write Below This Line

Card Number: 24019 \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Staff: \_\_\_\_\_

Profile:    Adult    Juvenile    Teacher