

# Gadsden Public Library Application Form

Proof of Etowah County residency and state issued ID required.

**Please Print**

Last name:

First name:  Middle name:

Library Card Bar Code:

Address 1:   
(Physical Address)

Address 2:   
(P.O. Box)

City:  State:

Zip Code:

Yes, I would like to receive the monthly newsletter.

Email:

(Your email address is only used for Overdue Notices or the Newsletter from your library account.)

Primary Phone:  Work Phone:

Other Phone:

In Care of:   
(If under the age of 16 it is required for the patron to have a responsible party for the account.)

Identification number:   
(Driver's license, Military ID, Passport, or State issued ID is required.)

Birthdate:  mm/dd/yyyy  
Library Card Expiration Date:

Pin #:   
(This is used to access your account through the Online Catalog.)

## Please read before signing.

*I apply for the right to use the library and promise to comply with all its rules, and I am legally responsible for all of Gadsden Public Library materials and I agree to pay for fines, damages, and lost materials charged to me. I am to give immediate notice of any change of address, email address, and home or cell phone number, or if I lose my card.*

Signature:

Parent or Guardian for underage Patron:

Alt ID:

Staff Member:

Date Completed:

# GPL's Children Department Library Application Form

Proof of Etowah County residency and state issued ID required.

**Please Print**

**Child's Last name:**

**Child's First name:**  **Child's Middle name:**

**Library Card Bar Code:**

**Address 1:**   
(Physical Address)

**Address 2:**   
(P.O. Box)

**City:**  **State:**

**Zip Code:**

**Yes, I would like to receive the monthly newsletter.**

**Email:**

(Your email address is only used for Overdue Notices or the Newsletter from your library account.)

**Primary Phone:**  **Work Phone:**

**Other Phone:**

**Guardian's Name:**

(If under the age of 16 it is required for the patron to have a responsible party for the account.)

**Guardian's Identification number:**

(Driver's license, Military ID, Passport, or State issued ID is required.)

**Child's Birthdate:**  **Library Card Expiration Date:**   
mm/dd/yyyy

**Pin #:**

(This is used to access your account through the Online Catalog.)

## Please read before signing.

*I apply for the right to use the library and promise to comply with all its rules, and I am legally responsible for all of Gadsden Public Library materials and I agree to pay for fines, damages, and lost materials charged to me. I am to give immediate notice of any change of address, email address, and home or cell phone number, or if I lose my card.*

**Signature:**

**Parent or Guardian for underage Patron:**

Alt ID:

Staff Member:

Date Completed:

# Biblioteca Pública de Gadsden Solicitud de Tarjeta

Se requieren prueba de residencia en el condado de Etowah e identificación adecuado con la solicitud.

Apellido:

Nombre:  Inicial Media:

Library Card Bar Code:

Dirección de la Calle:

Apartado Postal:

Ciudad:  Estado:

Si, gustaría recibir el boletín mensual.

Código Postal:

Dirección de Correo Electrónico:   
(Solamente está usado en caso de artículos tardes.)

Teléfono de la Casa:  Teléfono del Trabajo:

Teléfono Celular:

Nombre de Padre/Madre o Guardián:   
(Se requiere para aplicante bajo de 16 años.)

Número de Identificación:   
(Se requiere tarjeta de identificación con foto.)

Fecha de Nacimiento:  Tarjeta de Biblioteca Expira:   
mes/día/año

Pin #:   
(Se necesita para acceder a su cuenta en la computadora.)

## Por favor lea antes de firmar.

*Consiento pagar todas las multas, y los costos de artículos dañados o perdidos, que correspondan al uso de mi tarjeta; conformarme con el reglamento de la Biblioteca de Gadsden; y notificar inmediatamente al personal de la biblioteca si se pierda mi tarjeta, o si se cambie mi información.*

Firma:

Nombre de Padre/Madre o Guardián de  
Aplicante Menor:

Alt ID:  Staff Member:  Date Completed: