

Library Card Application - Adult Photo Identification Required

First Name	MI Last Name		
Identification # (Driver License, California ID, Pa	assport, etc.)		
Home Telephone #	Work or Cell #		
Birthdate	Male Female		
Mailing Address: Street or PO Box			
City	State	Zip	
Email address		will be sent two days befo	ore items are due. This
Signature: I accept responsibility for the selections I make for mys I agree to obey the rules and regulations of the El Dora incurred for any overdue, lost, or damaged materials b return of materials and the payment of fines and fees. I agree to notify the library of changes in address or er that I am responsible for charges on it until the date the	ado County Library and to be responsible for corrowed with this card, and know the library re mail addresses, telephone number, and name	may use a collection age	ncy to ensure the
Signature:		Date:	
Staff Use Only: Barcode 21738	Staff Initials:	Date:	RTS:

Library card applications are shredded after the information has been entered into the system.