



Library Card Application

Bring completed form to the circulation desk of any Kanawha County Public Library system location with acceptable identification including proof of your current address.
Please PRINT/Fields with asterisks must be completed

*First Name: _____ *Middle Name: _____

*Last Name: _____ Suffix (Jr., Sr., II, and III): _____

Preferred First Name (if different from above): _____

*Date of Birth (month/day/year): ____/____/____ *Gender: ___ Male ___ Female

*Mailing Address: _____ Apt # _____

*City: _____ State: _____ *Zip Code: _____ *County: _____

*Primary phone number: (____) _____ Email: _____

____ I want to receive hold, overdue and bill notices via email; (complete *Authorization and Consent* form if the email account is not your account).

____ I want to receive the KCPL monthly e-newsletter with updates about library events and news.

Alternate Address (Complete if the above mailing address is a temporary address)

Mailing Address: _____ Apt#: _____

City: _____ State: _____ Zip Code: _____ County: _____

Authorization and Consent to Share Library Account Information:

The library is authorized to share information from this library account with the person(s) listed on an Authorization and Consent to Share Library Account Information form. The custodial parent or legal guardian signing an application for a child aged from birth to 13 years will be listed on the account at the time of registration as authorized to review information on the account. The form is included on the reverse side of this application.)

Responsibility Agreement:

- I understand that the presentation of this card will allow checkout of items (both physical and downloadable), as well as access to premium electronic databases and the library public computers.
- I understand that I am responsible for all items checked out on this account, including items checked out with a lost or stolen card up until the time I report the problem to the library.
- I agree to observe all library policies and procedures and to promptly pay all charges incurred by the use of this card, including but not limited to overdue fines, long overdue fees and lost and/or damaged bills; to notify the library of any changes in the information provided on this form; and to report a lost or stolen card or key tag to the library.
- If this application is for a child aged from birth to 13 years, I certify that I am the custodial parent and/or legal guardian of this child.
- I understand that the library provides access to a broad range of materials and information, and that all library materials, including print and downloadable books, music and films, as well as electronic databases and the internet are available to all library users. I understand that I am responsible for my minor child's use of all library materials and resources, including the internet.

*Signature: _____ *Date (month/day/year): ____/____/____

Applicant – OR Parent/Legal Guardian if applicant is aged from birth through 13 years

*Please print name if signing for child from birth to 13 years of age: _____

STAFF USE ONLY

ID checked: _____ Previous ID #: _____ Mobile Library Stop Entered: _____

Authorization & Consent to Share Library Account Information form attached: ____ (Y or N)

Consent 1 Entered: _____ Consent 2 Entered: _____ New User ID: _____

Date Entered: ____/____/____ Staff Initials: _____



Authorization and Consent to Share Library Account Information

Authorization allows the library to **share information** from the account listed below with the person(s) designated on this form. This authorization also allows the designated person(s) to **check out items on hold** for this account if they present the library card of the person with the hold – or to check the items out to their own account. The designated person(s) may **also pay fines, bills and other charges** on this account. The designated person(s) must have acceptable identification available when information is requested or items on hold checked out.

- **Up to two person(s) may be authorized at any given time.**
- **Parent(s) or legal guardian(s) must be listed in order to receive information about their child’s library account** if the child is under the age of 18. **The custodial parent or legal guardian signing for an applicant aged 0-13 years is listed as one of the two authorized persons at the time of registration.**
- Patron must be **18 years or older** to authorize the sharing of information.
- Designated person(s) must be **18 years or older** to be granted authorization.
- Consent must be reauthorized when a patron moves from a minor status to an adult status.
- Names listed below are kept as part of the library account information. The library must be notified if you wish to make any changes.

Please PRINT/Fields with asterisks must be completed

SHARE INFORMATION FROM:

My account: _____ OR My child’s (aged birth to 17 years) account: _____	
*First Name: _____	*Date of Birth (month/day/year): ____/____/____
*Last Name: _____	*KCPL Card No.: _____

SHARE INFORMATION WITH:

*First Name: _____	*First Name: _____
Middle Name: _____	Middle Name: _____
*Last Name: _____	*Last Name: _____
Library Card #: _____	Library Card #: _____

Responsibility Agreement:

- I authorize the library to share information about this account (i.e. titles checked out, due dates, bills and holds) with the person(s) listed above; to allow them to pay fines, bills and other charges on this account; and to check out items on hold for this account to this account if they present my library card or to their account if they present acceptable identification.
- If this authorization is for a child aged 0-17, I certify that I am the custodial parent and/or legal guardian of this child.

*Signature: _____ *Date (month/day/year): ____/____/____
 Card holder – OR Parent/Legal Guardian if card holder is aged 0 through 17 years

*Please print name if signing for child 0 to 17 years of age: _____

STAFF USE ONLY		
ID checked: _____	Consent 1 Entered: _____	Consent 2 Entered: _____
Date Entered: ____/____/____	Staff Initials: _____	