



LIBRARY CARD APPLICATION

By signing this form, you accept responsibility for all items borrowed on your account, including charges for lost or damaged materials, and agree to comply with all library policies.

To obtain a library card, bring this completed form and a photo ID with your current address to any library branch. Library cards are free for Maryland residents. Residents of Pennsylvania, Virginia, and West Virginia may apply for a library card for a \$25 annual fee.

If your card is lost or stolen, notify library staff immediately. Replacement cards are available for \$1. Borrowing privileges will be suspended if your account balance exceeds \$6.

APPLICANT INFORMATION

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
FIRST NAME	M	LAST NAME	DATE OF BIRTH

<input type="text"/>	<input type="text"/>
STREET ADDRESS	APARTMENT

<input type="text"/>	<input type="text"/>	<input type="text"/>
CITY	STATE	ZIP CODE

<input type="text"/>
EMAIL

<input type="text"/>	<input type="checkbox"/> CALL	<input type="checkbox"/> TEXT	<input type="checkbox"/> EMAIL
PHONE	NOTIFICATIONS		

☐ I agree to receive promotional messages via my selected notification methods.

I certify that the information provided is accurate to the best of my knowledge.

_____ APPLICANT SIGNATURE	_____ DATE
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_____ PARENT/GUARDIAN NAME	_____ RELATIONSHIP
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_____ PARENT/GUARDIAN SIGNATURE	_____ DATE
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