

# MEMBER REGISTRATION FORM

## PRINT CLEARLY



Registration is open to any person who lives, attends school, works, or owns property and is either 5 years or older or has entered kindergarten within the borders of the OWWL Library System. Memberships obtained here list OPL as home library. Fields marked with \* are required.

NAME\* \_\_\_\_\_ Birth Year\* \_\_\_\_\_

ADDRESS\* \_\_\_\_\_ P.O. BOX \_\_\_\_\_

CITY/TOWN\* \_\_\_\_\_ ZIP\* \_\_\_\_\_ PHONE\* \_\_\_\_\_

EMAIL\* \_\_\_\_\_ *Optional* Please email me: Receipts \_\_\_\_\_ Newsletter \_\_\_\_\_

The Law assures confidentiality of personal information and library records. We do not sell or share your information. I accept responsibility for all use of this library card, fines and fees. I agree to abide by library policies.

APPLICANT'S SIGNATURE\* \_\_\_\_\_

Parent's/ Guardian's Signature (if under the age of 13\*) \_\_\_\_\_

**Office use only:**                      Circle one:    Adult    Juvenile                      Date \_\_\_\_\_                      Staff Initials \_\_\_\_\_

ID Verified \_\_\_\_\_ Patron Barcode # \_\_\_\_\_

upd 5/2/24