



CHILD'S LIBRARY CARD APPLICATION

1. **All child, parent and account notification information must be completed.** All information will be used for Library purposes only.
2. **Bring the child and this application to any Seattle Public Library to receive a Seattle Public Library card.**

CHILD'S INFORMATION (*PLEASE PRINT, SIGN and DATE*)

Child's Last Name: _____ First: _____ Middle: _____

Child's Address: _____ Apt #: _____

Child's City/State: _____ Zip code: _____

Child's Phone Number: (_____) _____ E-mail address: _____

Child's Date of Birth: ____/____/____
month date year

Child's Signature: _____ Today's Date: _____

PARENT OR GUARDIAN INFORMATION (*PLEASE PRINT, SIGN and DATE*)

Parent/Guardian's Last name: _____ First: _____ Middle: _____

If Parent/Guardian's address and other information are different please fill out the portion below ↓.

Parent/Guardian's Address: _____ Apt#: _____

Parent/Guardian's City/State: _____ Zip code: _____

Parent/Guardian's Phone Number: (_____) _____ E-mail address: _____

Please read before signing: Parents/guardians are responsible for monitoring the reading, listening and viewing choices of children 12 and under.

I verify that this information is correct and I assume financial responsibility for materials borrowed or charges incurred on any card issued from this application.

I give permission for you to contact me at the e-mail or phone listed above about my child's Library account.

Parent/Guardian's Signature: _____ Today's Date: _____

ACCOUNT NOTIFICATION (*PLEASE CHECK*)

How would you like to be notified about requested items and account information?

- E-mail** (best option) **to email address:** _____ @ _____ . _____
- TeleCirc** (our automated telephone service) **to phone number:** (_____) _____ - _____

STAFF USE ONLY: Barcode # _____ Borrower # _____