



THE  
PUBLIC  
LIBRARY  
of Cincinnati  
and  
Hamilton County

# LIBRARY CARD APPLICATION / UPDATE FORM

Today's Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Note: Those applying for a Child Only or Teen Only card need to fill out the first six lines; phone and email are optional. Internet Only card applicants need to fill out the first six lines and sign the borrower's agreement on the back.

Birth Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MM DD YYYY

Please Print Clearly

Name \_\_\_\_\_  
First MI Last

Mailing Address \_\_\_\_\_  
Street or P.O. Box Apt

City State ZIP -

County \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail \_\_\_\_\_

Street Address if different from above or Address of Parent/ Legal Guardian if different from above

Street \_\_\_\_\_ Apt \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ -

Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail \_\_\_\_\_

How do you want to receive information about this account? *If you sign up for email or text message, you will also receive courtesy notices before items are due, before your library card expires, and before your card is blocked due to an unresolved missing item. (check one)*

E-mail     Phone     Text Message    Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Service Provider \_\_\_\_\_

May we share your address, phone number, and e-mail address with the Library's Foundation & Friends' groups for fund-raising purposes?

Yes     No

Are you a teacher or educator applying for a Library card with educator status?

Yes     No    School Name (If applicable) \_\_\_\_\_

School Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Your e-mail at School \_\_\_\_\_

Are you a book club leader?

Yes     No

When does your book club usually meet? *e.g. 2nd Wednesday of the month or bimonthly, etc.* \_\_\_\_\_

Where does your book club usually meet? *e.g. members' house, restaurant, etc.* \_\_\_\_\_

*The Library will use the personal information you provide for official purposes only. We do not sell our list of account holders to other organizations or groups.*

## BORROWER'S AGREEMENT

## Read Before Signing!

I agree:

- To be responsible for all materials borrowed with my card.
- To pay all fines and fees associated with my card.
- To report the loss, theft, or abuse of my card immediately. I understand that I am responsible for all fines and fees and any items checked out on my card prior to being reported lost or stolen.
- To report changes in my account information.
- This is my only Library card from the Public Library of Cincinnati & Hamilton County.

Providing false information in this application is a felony of the third degree punishable by up to five years in prison and a fine of up to \$10,000. ORC 2913.42.

Your Signature:

X \_\_\_\_\_ Date \_\_\_\_\_

## PARENT/GUARDIAN AGREEMENT

Select the profile for this borrower (required):

\_\_\_\_\_ Unlimited Access: Borrower will be able to check out all circulating materials, including all videocassettes and DVDs.

\_\_\_\_\_ Limited–No Videos: Borrower will be able to check out all circulating materials except videocassettes and DVDs

\_\_\_\_\_ Limited–Juvenile: Borrower will be limited to checking out materials cataloged for children.

As a parent or legal guardian of this borrower under the age of eighteen, I agree:

- To be responsible for this borrower's selection and use of library materials.
- To pay all fines and fees associated with this card.
- To report the loss, theft, or abuse of this card immediately. I understand that I am responsible for all fines and fees and any items checked out on this card prior to being reported lost or stolen.
- To report changes in this account's information.

*Applicants under the age of 18 will be required to complete a new library card application upon turning 18.*

Providing false information in this application is a felony of the third degree punishable by up to five years in prison and a fine of up to \$10,000. ORC 2913.42.

Name and Signature of Parent/Guardian:

(Please Print) \_\_\_\_\_  
(Last) (First) (MI)

(Please Sign) X \_\_\_\_\_ Date \_\_\_\_\_

## FOR OFFICE USE

\_\_\_ New \_\_\_ Update \_\_\_ Internet Only \_\_\_ Book Club  
\_\_\_ Child Only \_\_\_ Teen Only \_\_\_ Downloadable Only

Did You Verify:

\_\_\_ Address? \_\_\_ Photo ID? (18+) \_\_\_ Reciprocal Library Card?  
\_\_\_ Educator Status? \_\_\_ Age/Card Profile? Staff Name \_\_\_\_\_ Location \_\_\_\_\_

LIBRARY CARD NUMBER

*affix bar code or write number here*