

## SUSSEX COUNTY LIBRARY SYSTEM REGISTRATION

(NOTE: A PARENT OR GUARDIAN MUST BE PRESENT AT THE TIME A CHILD UNDER THE AGE OF 13 APPLIES FOR A LIBRARY CARD.)

Name (Last, First, Middle): \_\_\_\_\_

Mailing address: \_\_\_\_\_

City, State: \_\_\_\_\_

Zip: \_\_\_\_\_

Municipality (if different from city listed above): \_\_\_\_\_

*If you do not live in Sussex County year-round or if your mailing address is a P.O. Box, please complete the following:*

Permanent street address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Email address: \_\_\_\_\_

Circle one:            Male                                  Female

Age (circle one):

5 – 12                                  13-16                                  17-59                                  60+

Phone (home): \_\_\_\_\_

(cell): \_\_\_\_\_

(work): \_\_\_\_\_

Preferred library for hold pick-ups: \_\_\_\_\_

Date of birth: \_\_\_\_\_

School (if applicable): \_\_\_\_\_

Parent or guardian (if under 18): \_\_\_\_\_

### FOR STAFF USE ONLY:

Barcode: \_\_\_\_\_ PIN: \_\_\_\_\_

Date/initials: \_\_\_\_\_ BTYPE: \_\_\_\_\_

*(Last rev. 9/12/11)*