

Children's Library Card Application

Welcome to the Seneca Nation Library-Allegany Branch!

Barcode 11985_____

A child must have a parent or legal guardian's permission before the library can issue a card. The child must be present to sign and receive the card. Proof of the child's current mailing address must be provided. All of the information on this form is kept confidential by law.

Child's full name _____ Male _____ Female _____ Phone _____

Mailing Address _____ City _____ State _____ Zip code _____

Street Address _____ **Child's Birth date _____ - _____ - _____ **

(if different from mailing address – PO Box is not a sufficient address)

Public School District in which child lives _____ Township in which child lives _____

Mother's full name _____ Phone _____

Mailing address if different from above _____ City _____ State _____ Zip code _____

Father's full name _____ Phone _____

Mailing Address if different from above _____ City _____ State _____ Zip code _____

Legal guardian's full name (if not parent) _____ Phone _____

Mailing Address if different from above _____ City _____ State _____ Zip code _____

The information in this box does not have to be provided. However, if the child's card is lost or stolen and someone attempts to make unauthorized use of it, the information will be very useful in helping the library stop this misuse.

Child's social security number _____ or Child's mother's maiden name _____

We agree to abide by the rules and regulations of the Seneca Nation Library-Allegany Branch and to be responsible for all library materials checked out on this card and any fines and fees assessed for overdue library materials and lost or damaged items charged to this card. In the event this card is stolen or lost, we understand that we are responsible for charges pending until the date the library is notified of the loss of the card.

Child's signature _____ Date _____

child must sign here, first and last name

Parent or Guardian's signature _____ Card# 11985 _____