Washington County Public Library Borrower's Card Application

Applicants please read and then complete this application. To establish your library account and receive your borrower's card, please present the application at the checkout desk along with positive identification such as your driver's license or learner's permit. Your identification must validate your current permanent address. **Non-Resident patrons will be charged \$10 per adult/\$5 per child. Replacement cards are \$5.**

Last Name:		Fi	rst Name:		_Middle Initial: _		
Gender: Male	Female Date of Birth:			Driver's License #:			
Mailing Address:							
	Street Address/Ap	t. #, P.O. Box					
City:	C	ounty:		State:	Zip:		
Home Phone:		Cell Phone: _		Work Phone: _			
Daytime Phone: _			Email:				
Contact Preference: (Please circle one) Email Cell Phone Home Phone Work Phone Text **If text is selected please provide mobile phone carrier:							
Parent/Guardian's	Name:						
(If you are under age 19	only) Fir	st Name	Middle Initial	Last Name			
Parent/Guardian's	Contact Infor	mation: Home:		Work:	Cell:		
All Patrons who wish to use the computer lab must have a signed Computer Usage Agreement form on file. Patrons under age							

19 must have a Computer Usage Agreement signed by a parent or legal guardian on file before using the computer lab.

Please read and sign the following agreement:

I will abide by Library rules related to borrowing privileges and responsibilities. I understand that borrower cards are not transferrable, and I will present my card each time I check out materials. I will promptly notify the Library of a change of address or loss of the card.

Date:	Signature:
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Washington County Public Library Computer Use Agreement

Washington County Public Library offers free Internet access for public use. In order to use and enjoy the free computer technology services provided, users are expected and abide by policies approved by the Board of Directors.

By signing the **Computer Use Agreement (CUA)**, I acknowledge that I have read and do understand the Computer and Internet Usage Policy as presented by the WCPL. By using a computer workstation at the Washington County Public Library and/or the McIntosh Branch Library, I agree to follow the rules and regulations expressed in these policies and I understand that failure to do so will result in the loss of computer lab privileges.

Patron's Signature:	
Patron's Printed Name:	
Date Signed:	Birth Date:
If under 18 years of age.	
Parent / Guardian Signature:	
Parent / Guardian Printed Name:	
Relationship:	