

Rockford Carnegie Library - Card Application

162 South Main Street · Rockford, OH 45882 · 419-363-2630

Card Number	O Adu	ult O Juvenile	Date Registered		
Patron is responsible for all materials	borrowed, includ	ing fines, fees, or cl	harges. Information	on will be used for	library use only.
irst Name Preferred Name					
Middle Initial	_ Last Name	e			
Do you want your checkout histo	ry saved?	○ Yes (○No		
PIN (4 digits required, ex. last 4 #'s of phone)			(used for checking account online)		
Please notify me by (select one)	OPhone	O Email	○ Text	C Email 8	k Text
Birthdate		Age			
Guardian's Name				_	
Applicant's Address					
City	State	ZIP _			
Email Address					
Phone Number		Cell			
Alternate Address (if any)(Physical address, additional home, guard	ian address, etc	:.)			-
City	State	ZIP _			
Phone Number					
Would you like to be e-mailed ou	r newsletter	? O Yes	○ No		
Parent's Signature (if under 18) _					