

## **Library Card Application**

DOWNEY CITY LIBRARY

APPLICANT'S NAME:				
	Last	Name		Middle Initial
				_
ADDRESS: (Proof of California residency)	Street	City	State	Zip Code
DATE OF BIRTH:	/	GENDER:	□ Male	Female
РНОТО ID: <u>#</u>		PHONE #: (	) -	
<b>PIN #</b> (Four digits-to access you <b>E-MAIL:</b>	r personal library record, borrow lap	tops, and reserve public compute	rs)	
	e: I would like to receive librar	ny potiona via 🗆 E mail		
·	_			ext
➢ e-Receipt ☐ E-mail				
I would like the system to	o keep a history of my check	outs		
I would like to receive inf	ormation by e-mail about Lib	rary programs, services an	d initiatives	
I assume complete financial respon- is for my use only and is not to be u to legal action, and reporting the del	ised by others. I understand that th			
Applicant's Signature		Date Signed		
Signature of Par			Parent or Gua	
The Downey City Library supports Downey City Library does not monit for their content. It is the responsi guardians of minor children assume internet. I understand that I am fina available upon request.	or and has no control over informati bility of the library user to evaluate e sole responsibility for guiding and	library materials for themselves, ion accessed through the Internet the validity of the information fo being aware of their child's use	including those in /e-resources and ca und on the Interne of all library materi	electronic formats. The annot be held responsible t/e-resource. Parents or als: printed, electronic or
MY MINOR IS PERMITTED TO:				
ACCESS THE INTERNET AT THE DOWNEY CITY LIBRARY				
DOWNLOAD DOWNEY CITY	LIBRARY E-CONTENT	I CONSENT TO A P Initial BEING ADDED TO T		
Signature of I	Parent or Guardian	Print	Name of Parent	or Guardian
-		ancel, in person, their minor child's account at any point.		
	and have the right to restrict of		shind o docodine de	
<b>Please Note:</b> Per California Public Records Act (Government Code Section 6267), Library staff is unable to give any information regarding a library account to anyone other than the cardholder on the library account regardless of age or		FOR STAFF USE ONLY		
		Staff Initials:	Dates	
	COUNT REGARGIESS OF AGE OF	1		
have read and understand the a	se initial here to indicate you	Language Dhone Carrie	er 🗌 Mailing Addre	ess Reviewed by: