



# SANTA MONICA PUBLIC

# LIBRARY

## LIBRARY CARD APPLICATION

You may obtain a Santa Monica Public Library card with a completed application, a California Drivers License or other valid photo I.D, and confirmation of your current California residence.

**PLEASE PRINT**

<b>Last Name</b>	<b>First Name</b>	<b>Middle Initial</b>
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<b>Residence Address</b>
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<b>City</b>	<b>State</b>	<b>Zip Code</b>
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<b>Mailing Address (if different than residence)</b>
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<b>City</b>	<b>State</b>	<b>Zip Code</b>
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<b>Home Phone #</b>	<b>Cell Phone #</b>
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<b>How would you like to be informed of due date and hold pick-up notifications?</b> <input type="checkbox"/> <b>Telephone:</b> <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> <b>Text:</b> Mobile Provider _____ <input type="checkbox"/> <b>Email</b> _____ <input type="checkbox"/> Also email me about upcoming Library events	<b>Birth Date</b>
	California Drivers License/ID #
	School (K-12)

I agree to be responsible for all materials checked out on my card, with or without my consent; to report a lost card immediately; to observe library rules; to promptly pay all charges and to notify the library of any changes to my address.

**Signature of Applicant** \_\_\_\_\_

**Parent/Guardian** (must sign for children under the age of 12)

I understand that my child will have unrestricted access to all resources, both in print and electronic. I agree to be responsible for any item my child borrows. By law, the library protects the confidentiality of all borrower records (California Government Code, section 6267) (a)(b)(c); 6254(j)), including items checked out to children.

**Signature of Parent/Guardian** \_\_\_\_\_

**Parent/Guardian Name** (please print) \_\_\_\_\_

**STAFF USE ONLY**

Barcode _____	Adult	Juvenile	Teen
Statistical Class _____	Registered by _____	Date _____	