Martha Canfield Library
Library Card Application

(Please print)
Name_____________________________________________________
Mailing Address_____________________________________________

Telephone__________________________________________________

In signing this application, I agree to be responsible for any books or other materials
checked out using my card, to make every attempt to return items on time and in good
condition. I understand that failure to follow the rules of the library regarding overdue
books may result in the suspension of my borrowing privileges.

Signature of Applicant_______________________________________
Date________________________

Would you like to be added to our mailing list?___________

Would you like to receive an occasional e-mail newsletter?__________
E-mail address (please print clearly)_____________________________

For Children Under 16:
Child must be able to sign his/her name as applicant (above) and parent must also
sign below

Parent or Guardian Signature_____________________________________

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Rev 8/4/02 sba