

PROXY APPLICATION FOR ADULT LIBRARY CARD



Name _____
Mr/Miss/Mrs/Ms First Middle Initial Last

Local Address _____
No. Street

City County State Zip Code (Zip +4)

Home Telephone (_____) _____ Business Phone (_____) _____

Date of Birth _____ Social Security Number _____
Month/Day/Year

Notification: Select Preferred Method of Notification for Overdue, Lost and Request Items:

E-mail Address _____
I would like overdue, lost item and request notices sent to the above e-mail account.

Telephone Number (____) _____
I do not have an e-mail account. I would like overdue and request notices from an automated telephone system.

Notices are sent as a courtesy. Non-receipt of a notice does not eliminate liability for outstanding materials or fines.

Yes! I would like to receive information about the Buffalo & Erie County Public Library.

Permanent Address _____
(If different from above) No. Street

City State Zip Code (Zip +4)

Patron Authorization

I authorize _____ to act on my behalf in applying for a library card.
First Middle Initial Last

I understand that the library card will be mailed to me.

Borrowers must adhere to Library policy and procedures. Individuals are expected to return library materials on time and in good condition to avoid fines and possible referral to a collection agency which results in an additional fee. The Library is not responsible for any damages to electronic equipment incurred during the use of Library materials.

By signing this application, I accept responsibility for all materials and computer usage associated with my library card. This includes fines and/or fees incurred for overdue, lost, damaged or stolen items. I will immediately notify the Library if there is a change in name, address, e-mail address, telephone number or loss/theft of this card.

Signature _____ Date _____

Proxy Information

Name _____
Mr/Miss/Mrs/Ms First Middle Initial Last

Local Address _____
No. Street

City County State Zip Code (Zip +4)

Signature _____ Date _____

Staff Use Only below this line

Date _____

Previous ID #10001 _____

Patron ID #10001 _____

Driver's License/ID: _____ Exp. Date _____

Expiration Date of Library Card: _____

- New
- COA
- LC Report
- Replacement
- Profile Change
- Phone Number Change
- Name Change
- E-mail Change

Staff Initials _____

User Profile

- Adult (Age 17 and older)
- New-Adlt
- NonRestu
- Shorterm

Rev 10/07

PIN _____
4 numbers only – no letters
(Staff member give PIN to applicant)