

Belding Memorial Library Library Card Application

Name:

Birthday (month, date, year):

Phone number:

Phone number for text alerts:

Name of parent/guardian if aged 17 or younger:

Home address:

Mailing Address:

Email address:

How would you like to receive holds notifications? Check all that apply.

Text _____ Email _____ Phone call _____

Signature of Patron

**Signature of Parent/Guardian
(if under 17)**

Initials of staff