## Library Card Registration Form

### *Required information*

<table>
<thead>
<tr>
<th>Name</th>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Initial</th>
<th>Suffix</th>
</tr>
</thead>
</table>

*Address:_________________________________________________________ Apt. # _________

*City/Town:_________________________________________________________ PA ______ *Zip:___________________________

Alternate Address_______________________________________________

*Primary Phone:___________________________________________________ Alternate Phone:_____________________

*City, Borough, or Township:________________________________________ *County___________________________

*Name of primary contact at this address for Library mailings:_________________________

*School District:___________________________________________________ E-mail:_____________________________

*Date of Birth: Month:______ Day:______ Year:______________________ *Gender: M F

Language(s) spoken at home other than English_________________________ Home-Schooler: Yes  No

(If available) Would you like to be informed about Library events via email? YES NO

By signing you apply for the right to use the Library and you promise to abide by all its rules, to give immediate notice of change of address or telephone number, and to promptly pay any fines or damages charged to your card. All registered card holders in good standing have equal right to access all materials and services the Library provides. Some services (i.e.: computing) may require additional signatures. The Independent Local Public Libraries of Lancaster County recognize the legal guaranties of confidentiality as specified by law in The Library Code, Act of June 14, 1961, P.L. 324, as amended through July 1, 1985, Section 428. The Library promises to keep all Library transactions of all clients confidential and will disclose information to secondary sources only if permission is granted by cardholder or upon legal subpoena.

Any child under 14 years of age must have a parent’s signature. Parents and guardians signing for borrowers under the age of 14 are responsible for their overdue fines and lost materials incurred by their usage. Parents and guardians are also responsible for monitoring the materials their children or wards borrow through personal interaction with the child. Please note the Library respects the confidentiality of all clients and extends equal privileges and responsibilities to all clients regardless of age. **Parents inquiring on a child’s card will need to have the child’s consent for information disclosure.**

I have read the Library Card User Rights and Responsibilities and this application in full and agree to comply with the guidelines presented.

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**Applicant Signature:** ___________________________ Date__________________________

**Parent Signature** (if applicant is under 14) __________________________________________

Library use only:

Barcode_____________________________ Date__________________________

Identification Used & Number (Driver’s License#):

Staff Member Initials_________________ Out of County: □ Access Card Verification □ Fee ____________ Updated 6/08
Computer User Contract - Valid for up to 3 Years
(expires concurrent with Library card)

Name ________________________________________________________________________________________

Library Card Number _____________________________________________________________________________

Signed at Location _____________________________________________________________________________

Address ________________________________________________________________________________________

________________________________________
Are you 18 years of age or older? YES     NO  If no, give date of birth ______________________________

I have read, understand and agree to comply with the Public Libraries of Lancaster County Cooperative Internet and Computer Use Policy and Disclaimers. I further understand any infraction of the agreement will result in the loss of my computer privileges. I agree to hold LSLC and its representatives harmless for any and all loss, problem, or damage resulting from my use of Library computers or internet access. Further, I agree to indemnify LSLC for any loss or liability that I may incur as a result of any violation of the Computer Use Policy (stated or unstated) by me.

Signature ______________________________________________________________   Date _______________

Staff Witness __________________________________________________________   Date _______________

If the user is under the age of 18 a parent or legal guardian must sign below

By signing below I give permission for my child to use the Library computers and/or access the internet and that I am the legal guardian. I understand by signing this contract they may use the computers, under the agreement as stated here and on the Public Libraries of Lancaster County Cooperative Internet and Computer Use Policy and Disclaimers, without my immediate supervision.

Parent/Guardian Signature __________________________________________________   Date _______________

Staff Witness __________________________________________________________   Date _______________

LSLC prohibits “displaying, downloading or copying offensive or inappropriate messages, pictures or explicit sexual material as defined in 19 Pa. C.S.A. § 5903.”

U.S. Copyright Law (Title 17, US Code) prohibits the unauthorized reproduction or distribution of copyrighted materials, except as permitted by the principles of “fair use.” Users may not copy or distribute electronic materials (including electronic mail, text images, programs, or data) without the explicit permission of the copyright holder. Responsibility for any consequences of copyright infringement lies with the user.

I understand that should I violate any portion of the Public Libraries of Lancaster County Cooperative Internet and Computer Use Policy and Disclaimers either explicitly or implicitly I shall lose all computing privileges within LSLC.