

# GRAY PUBLIC LIBRARY

## JUVENILE ACCOUNT REGISTRATION

\_\_\_\_\_  
Child's Last Name (please print)

\_\_\_\_\_  
Child's First Name (please print)

\_\_\_\_\_  
Middle Initial

### Parent Information:

\_\_\_\_\_  
Last Name (please print)

\_\_\_\_\_  
First Name (please print)

\_\_\_\_\_  
Middle Initial

\_\_\_\_\_  
Mailing address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Physical address (if different from above)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Primary Telephone #

\_\_\_\_\_  
Secondary Telephone #

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Child's Date of Birth

When the library notifies me, I prefer:

phone

email

(please circle one)

I AGREE TO USE LIBRARY MATERIALS RESPONSIBLY, TO TAKE GOOD CARE OF ALL THINGS THAT I BORROW, AND TO BRING THEM BACK ON TIME:

\_\_\_\_\_  
Signature of child

\_\_\_\_\_  
Date

I AM THE LEGALLY RESPONSIBLE GUARDIAN OF THE CHILD LISTED ABOVE. BY ACCEPTING THIS LIBRARY CARD I AM AGREEING TO BE RESPONSIBLE FOR ALL CHARGES INCURRED AND TO ABIDE BY ALL LIBRARY RULES.

\_\_\_\_\_  
Parent / Legal Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
STAFF USE ONLY

Parent/Legal Guardian ID \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Entered by: \_\_\_\_\_

Verified by: \_\_\_\_\_

Child's Card #: 24039 \_\_\_\_\_

Parent Card # 24039 \_\_\_\_\_