

Office Use Only:

Verified Proof of Residence

Registered

**APPLICATION FOR LIBRARY CARD & COMPUTER / INTERNET USE**

*Yates Community Library 15 N. Main St. Lyndonville, NY 14098 (585)765-9041*

*\*Please Print Clearly*

**Date of Birth:** \_\_\_\_\_

**Name:** \_\_\_\_\_  
Last First M.I.

**Address (include P.O. Box):** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP Code:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Work / Cell Phone:** \_\_\_\_\_

**Email\*:** \_\_\_\_\_

(\*NOTE: you will ONLY receive mail from [notices@nioga.org](mailto:notices@nioga.org), letting you know of items due soon, overdue items, or Hold items that have arrived at the Library for you)

**Parent or Legal Guardian, print & sign name below (if applicant is under 18):**

**IMPORTANT NOTICE:** I agree to observe all rules established by the Library, and will be responsible for all materials borrowed on my card. I also agree to pay fines or other charges imposed for late return, loss, or mutilation of library materials. I will notify the Library if my card is lost; or if I change my name, address, or telephone number. I understand a \$ 1.00 fee will be assessed for a lost library card, and that I must have my card in my possession in order to borrow Library materials.

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**COMPUTERS & INTERNET USE:** I have read the rules for using the computers and the Internet at Yates Community Library, and agree to follow them. I understand that if my actions while using the computer are inconsistent with these rules, I will lose these privileges at Yates Community Library.

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

Parent must approve of use & sign above for those under age 18