New Library Card Application – Barneveld PL

_____ _____ _____

Last Name M.I. First Name

Address: _____

City: _____ State: _____ Zip Code: _____

Residence is located in: _____ **COUNTY**

And in (check one): _____ Township _____ City _____ Village

Name of Township, City, or Village: _____

Email: _____

Primary Phone (including area code): _____

Alternate Phone (including area code): _____

Date of Birth: _____

Parent/Guardian Name [*for child's card]: _____

Valid Driver's License or State ID required for all applicants (Parent/Guardian must provide a Driver's License of State ID # for unlicensed applicants under age 16.)

State: _____ DL # or other valid ID _____

Language: _____English _____Spanish Other _____

AL 4/17