YORK COUNTY PUBLIC LIBRARY
Application for Library Card

To register for a library card, please complete and print this form. Bring the completed form, **current photo identification** and proof of **current address**, such as driver's license, state photo ID, printed checkbook or auto registration to the Circulation desk.

Name: _____ _____ _____
Last First Middle Initial

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone: _____ **Cell Phone:** _____

Would you like to keep track of checkouts? Yes ◯ No ◯

Email Address: _____

Permanent Address (if different from above): _____

City: _____ **State:** _____ **Zip:** _____

I am responsible for all materials borrowed, fines incurred, and payment for lost or damaged material. Overdue materials on a juvenile's card may affect the status of the adult's card and the cards of other juveniles for which the adult has cosigned. Parent/Guardian must sign for children ages 4-16. I accept responsibility for the selection of materials made by this person including access to the Internet.

Signature of Applicant/Parent _____

Print Name of Applicant/Parent _____

I authorize _____
to have access to my library account.

Print Form