

PLUM CREEK LIBRARY SYSTEM

Registration Form

*indicates a required field

Library Use Only (All fields required)

Barcode Number _____ Patron Type _____ Date _____

Member Library Agency _____

County Commission District _____ Reciprocal Borrower Type (if applicable) _____

*Last Name _____ *First Name _____ *Middle _____

*Date of Birth (mm/dd/yy) ____ / ____ / ____

*Permanent Address: Street _____ PO Box _____

*County _____ *City _____ *State _____ *Zip Code _____

*Telephone Number _____ Cell Number _____

Email Address _____ Alternate Email _____

*Driver's License Number _____ *Expiration Date _____

Alternative Identification Number _____ Expiration Date _____ Type _____

Temporary Address: Street _____ PO Box _____

County _____ City _____ State _____ Zip Code _____

Employer _____ Work Telephone Number _____

*Do you reside within the city limits? YES NO *Township _____
(Only if living outside the city limits)

Would you like to receive Holds, Overdue and Fine notices by Email? YES NO

Pursuant to the Minnesota Government Data Practices Act, library users must be informed of what private data is being collected, its uses and disposition (sometimes referred to as the "Tennessee warning"). By Minnesota law, information you provide in applying for a library card (other than your name) is private. Likewise, services you use, such as checking out materials and using the internet, are also private. This information is available only to you and to appropriate library personnel. You are not legally required to provide the information on the application, but you will not receive a library card if you choose not to provide the requested information. The personal information provided, including materials checked out, must be released pursuant to a court order or may be shared with another agency in pursuit of unreturned materials or excessive fines.

Please read before signing: I verify that this information is correct and I assume financial responsibility for materials borrowed or charges incurred on any card issued from this application.

Signature (ink only) _____ Date _____

If user is under 18 years of age, please complete the following:

*Printed Name of Parent or Guardian _____

*Signature of Parent or Guardian _____

*Address (if different from above) _____

Telephone Number (if different from above) _____ E-mail (optional) _____

Revised 2/16 NOTES: _____

Last Name _____

First Name _____

Middle _____