



ALEXANDRIA LIBRARY CARD APPLICATION

Please print clearly. Proof of address and photo ID are required at registration.

Name: _____ Birth Date: _____
First Middle Last Month Day Year

Email: _____ Phone: _____

Due date reminder, overdue and hold pickup e-mail notices will be sent to this address

Address: _____
Street Address Apartment No.

City State Zip Code + 4

Business/School Address: _____
Street Address

City State Zip Code + 4

- I am responsible for items borrowed with this card and for any fees billed to the account.
- I must immediately notify the library of my lost or stolen card to prevent unauthorized use; I understand there is a replacement fee.
- I will promptly report any changes in my phone number, e-mail, and mailing address.
- I understand failure to receive library notices does not exempt me from fine and fees incurred.

Signature: _____ Date: _____
If under 16, parent's signature is required.

Parent's Signature: _____ Date: _____
Parents accept responsibility for child's choice of materials and agree to pay fines and fees incurred.

LIBRARY USE ONLY

Barcode: 29012 _____ Entered By: _____

Visit any Alexandria Library location, bringing current identification to secure a permanent card with full borrowing privileges.



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