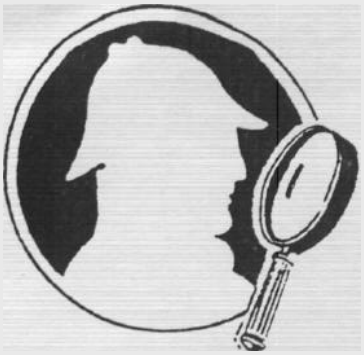

CLUES

Cumberland Libraries United Electronic System

PATRON REGISTRATION FORM

BARCODE

(Staff use)

Patron Category: _____

Municipality/ Township: _____

Registration Date:

Information taken by:

Completed by: _____

Sex: **M / F**

PLEASE PRINT

Last name first:

Mailing Address:

Home Phone #:

( ) -

Township/Municipality in which you reside; own property; or have a business:

_____

Name of Employer:

Work Phone #: ( ) _____

School: **Grade:** _____

Date of birth: _____ **Social Security #:**

Driver's License #: _____ **Other I.D.:** _____

I agree to follow all library rules, to pay promptly all charges for overdue, lost, and damaged materials and to give immediate notice of any change of address or loss of library card. I understand that I am responsible for all materials checked out on this card. This information is confidential. We do not distribute it to other agencies. APPLICANT MUST SIGN FORM. If under 18 parent or guardian must sign form.

Signature: _____