

JEFFERSON-MADISON REGIONAL LIBRARY LIBRARY CARD APPLICATION

Applicant must present picture identification with name and current address. If an address is outside of Charlottesville, Albemarle, Louisa, Greene, or Nelson there is an annual out-of-area fee of \$30.00. Please print all information clearly.

City or County of Residence		Birth Date (mm/dd/yy	ууу)	
Last Name	First Name		Middle Initial	
Mailing Address			Apt. #	‡
City, State			Zip C	ode
E-mail Address		Telephone		
Residential or permanent address, if different from above. Required if a PO Box is listed above.				
Street			Apt. #	‡
City, State			Zip C	ode
Please list additional individuals who may access this account:				
Full Name				
Full Name				
I agree to be responsible f to observe library rules; to address changes.	<u> </u>	•	•	
Signature of Applicant:				
For Parent or Guardian of Minor Applicant (Under 18) I acknowledge that this library card entitles my child to complete access to all library materials. I assume responsibility for library materials borrowed by this child from the library.				
Parent's Name (Print):				
Parent's Signature:				
Staff Use Only Date:	Initials:	Barcode #:		
Postcard Registration □	In-House Use Only □	Out of Area □	L0015	BDE 6/23