Broome County Public Library Library Card Application (please present ID)

Last Name		
First Name		M.I
Address:		
•		
Phone:	Date of Birth:	
E-mail:		
You will receive overdue and holds	notices by e-mail if you provide us	with an e-mail address.
Parent/Guardian (if child is 13 or unde	er) please p	orint
("	picase p	onn.
I assume responsibility for	all materials checked out wi	th this card:
Signature of borrower or parent/guard	lian:	
	Staff Use Only	
Library Card #:	Date:	ID: