LIBRARY CARD APPLICATION

ADULT NEW CARD APPLICATION			BIRTH DATE:	
MALE		FEMALE		MONTH DAT TEAK
JUVENILE N	EW CARD APP	LICATION	BIRTH DATE:	/ / Month day year
MALE		FEMALE		MONTH DAY YEAK
PARENT / GU	JARDIAN NAME (PLE	ASE PRINT)		
CHECK THIS	S BOX IF YOU WISH T	O RECEIVE COMMUNICATIO	DNS / NOTICES VIA E-MA	IL
E-MAIL ADI	DRESS:			
ADDRESS OI	R NAME CHAN	IGE		
OLD NAME:				
OLD ADDRESS:				
SIGNATURE: _		ernet or to check out a		
LAST NAME		FIRST NAME		MIDDLE NAME
MAILING ADDRESS:				
CITY, STATE, ZIP:				
DAYTIME PHONE:	DAYTIME PHONE: NIGHTTIME PHONE:			
CA DRIVER'S LICENSE	CA DRIVER'S LICENSE OR ID# COUNTY OF RESIDENCE			
THIS SECTION FOR LIBI	RARY USE ONLY			
BRANCH ID			BAR CODE:	
□ NEW	MAIL	NOF	RENAME	CHANGE INITIALS DATE
TEMPORARY CARD		DEPOSIT RECEIPT # _		EXPIRATION DATE:
HOME LIBRARY				CARD#
PERMANENT ADDRESS				
LIBC01		Humboldt County Librar	ry -	6/13/08