

Legal Last Name :	Former Names:
Legal First Name:	2nd Last:
Legal Middle Name:	Date of Birth:
Month / Day / Year	
Mailing Address:	
(RR/fire# or cabin patron) Number & Street Apt # P.O.Box City State ZIP code	
Street Address:	
If different from mailing	
City/Town/Village:	County:

Proof of ID: *Driver License State Military Tribal Passport Green Card*

You must present a government-issued photo ID with current address or accompanying proof of address at the time of application.

Required ID Number:

Contact Preference: Fill out all & mark preferred method for holds/overdue:choose one

☐ Phone Number:

☐ E-mail:

☐ Mail Only

Text: sign up at your account in V-Cat (charges may apply)

Preferred Name & Other:

I hereby apply for borrowing privileges at **Library Name** and all WVLS Libraries. By signing this agreement, I agree to comply with the policies of each member library with which I do business. I accept the following responsibilities: Any library materials checked out on my card are my sole responsibility. I will promptly return all borrowed items by the due date or pay overdue charges. I will pay any replacement costs assessed for lost, unreturned or damaged materials. I will not lend my library card to others. I will promptly report any change in contact information. I will promptly report a lost or stolen card. I will obey the rules of behavior when visiting the library. **I understand that failure to act responsibly may result in suspension of my library borrowing and use privileges, and that failure to pay library fines or return library materials may result in local and state criminal penalties.** Initial_____

If signing a library card application for a juvenile, I accept responsibility for fines and charges on that child's card and acknowledge that it is my responsibility, not the library's, to monitor and approve my child's choice of library materials and/or other information resources. I understand that I can request library records for my custodial child/ward under 16 (WI ST 43.30). Initial_____

Signature:	Date:
Library Staff Use only:	ID/ Proof of Residency: D.L. S.ID M.ID T.ID Passport GC Utility Tax
Barcode:	Renewal Card Link Address Staff

For Patrons Under Age 18 Only

Date of Birth: _____
Month / Day / Year

Legal Last Name :	2nd Last:
Legal First Name:	Middle Name:

I hereby apply for borrowing privileges as the parent or legal guardian of this minor at **Library Name** and all WVLS Libraries. By signing this agreement, I and said minor agree to comply with the policies of each member library with which we do business. I accept the following responsibilities: Any library materials checked out on this card are my sole responsibility. I will promptly return all borrowed items by the due date or pay overdue charges. I will pay any replacement costs assessed for lost, unreturned or damaged materials. I will promptly report any change in contact information. I will promptly report a lost or stolen card. I and said minor will obey the rules of behavior when visiting the library. **I understand that failure to act responsibly may result in suspension of my library borrowing and use privileges, and that failure to pay library fines or return library materials may result in local and state criminal penalties.** Initial_____

I acknowledge that it is my responsibility, not the library’s, to monitor and approve my child’s/ward’s choice of library materials and/or other information resources. I understand that I can request library records for my custodial child/ward under 16 (WI ST 43.30). Initial_____

My child/ward of 12 years of age or older has permission to use internet. There are no filters on the Internet Station. A parent or guardian must accompany a minor under 12 years of age. ☐ Yes ☐ No

Parent/ Guardian Name (s):

Mailing Address:

(RR/fire# or cabin patron) Number & Street Apt # P.O.Box City State ZIP code

Street Address:

City/Town/Village:

County:

Contact Preference:

Fill out all & mark preferred method for holds/overdue:choose one

<input type="checkbox"/> Phone Number:	
<input type="checkbox"/> E-mail:	
<input type="checkbox"/> Mail Only	Text: sign up at your account in V-Cat (charges may apply)

Signature:

Signature:

Date:

Library Staff Use Only:	Verified Parent/Guardian Card	C/O
Minor Barcode:	Card Link	Address Staff