Northern Waters Library Network Library Card Registration



Date (MM-DD-YYYY): NOTE — Your library card			te on vour card an	d can be renewed. Y	ou mav
NOTE — Your li brary c ard contact your home librai				a can be renewed. I	- a may
Name (ALL CAPS):					
Last		First	Fu	ıll Middle	Suffix
Preferred Name (What I	name do you go by?	o):			
Birthdate (MM-DD-YYY)	/):				
Identification Verified (circle one): Y	N			
County:		Township: _			
Applicant Mailing Addre				,, State	Zip Code
What type of address is	Address this (circle one)?	Permanent	City Vacation Home	_	Zip Code
If you circled any	thing but permaner	nt, please incl	ude an alternate a	ddress:	
Address	City		State	Zip Code	
Main Phone Number (1	11-111-1111):		Is Texting C	K? Yes No	
Email Address (all lowe	r case):			165 140	
Preferred Form of Cont	act (for overdue & l	nold notices –	· circle one): emai	l phone text	
May we contact you wi	th library news or q				
Responsible Party Name (if	annlicant is a child or at	Yes		ver).	
•				very.	
First Responsible Party Address:	Full Middle	Last			
	Address	City		State Zip Code	
Individuals are limited to on	e card in the Northern	Waters Library N	letwork, regardless of	f the place of issue. Patro	ons must fill out
an application form and provused, or library staff may ver	ide proof of Identity and	a residence. A ai zuidelines from t	he Wisconsin Proof of	Residence for Voter Res	istration guide
(elections.wi.gov/publication	ity residence using the E	guidennes from t f-residence). Res	idents, property own	ers, and visitors to the ar	ea are eligible to
apply for a library card. Each	library in the Network	shall provide the	same services to all re	esidents and property ow	ners of the
Northern Waters Library Ser	vice area as to residents	. I understand w	hen I borrow items fro	om my home library that	I agree to the
lending and fine rules of my	home library. I also unde	erstand that whe	en I borrow items fron	n other libraries in the No	etwork or via Inter
Library Loan, that I am agree	ing to the lending and fi	ne rules from th	ose member libraries.	Applicants under 18 year	irs of age or adults
with a legal guardian or care	giver must have a paren	t, guardian, or o	ther adult serve as the	e responsible party for th	e card. The
responsible party is ultimate	ly responsible for any la	te fees or lost m	aterials on the card ar	nd must provide contact i	intormation and
sign the card application form have read and agree to the t	n. I agree that the infor terms stated on this app	mation on my a olication:	pplication is correct to	o the best of my knowle	age and that i
Printed Name:		signature:	Parks and the state of the stat		
Office Use Only Staff initia	ls: ID Verified: Y	N Data entry ch	necked for accuracy a	nd duplicates (staff initia	als):