

Scappoose Public Library District Juvenile Borrower Card Application

Date _____

Last Name _____ First _____ M.I. _____
(Please Print) (Please Print)

Home Address _____

Mailing Address _____
(If different from home address)

City _____ State _____ Zip Code _____

Date of Birth _____
(Month/Day/ Year)

Telephone _____ E-mail Address: _____

*I accept full responsibility for the use of this card and payment of fines and fees charged to it.
I will give immediate notice to the library of loss of card or change of address.*

Borrower Signature _____

• Parent / Guardian name (please print): _____

Parent / Guardian signature: _____

AND

• School Stamp and Teacher Initials: _____

STAFF USE ONLY IDENTIFICATION & VERIFICATION

LIBRARY CARD NUMBER _____

Identification _____

(Photo ID, Parent and Child's if appropriate. Driver's License or State ID Card, student body card, school verification, library postcard)

Address Verification (if not on photo ID) _____
(Utility Bill, Rent Receipt, school verification, library postcard)

Database Checked for Previous Card ___ Yes ___ No

Issued By _____ Date _____