CRYSTAL LAKE PUBLIC LIBRARY

Library Card#	
Form of Current ID	
RBP Home Library _	
Exp. Date	Staff Initials

Cardholder Agreement

I agree to comply with all rules and regulations of the Crystal Lake Public Library, to pay promptly all charges levied by the Library and to notify the Library of any change of address or loss of card. The Crystal Lake Public Library is a member of the Reaching Across Illinois Library System (RAILS) and the Cooperative Computer System (CCS). In presenting a CLPL card for use of materials or services at member libraries, the undersigned cardholder agrees to comply with all rules & regulations and to pay promptly all charges levied by the member library.

Cardholder Application

Name					
	Last		First		Middle Initial
Phone 1:		Phone 2:			Birthdate
E-mail:					
Address:			City	:	Zip Code:
				Email	(Choose one) Carrier
Signature				USPS Ma Phone	il
Additional r	<u>minors:</u>				
Minor #1	Last	First	Initial	Birthdate	Card #
Minor #2	Last	First	Initial	Birthdate	Card #
Minor #3	Last	First	Initial	Birthdate	Card #
Minor #4	Last	First	Initial	Birthdate	Card #
	Läst	FILST	Initial	Birtridate	

MINOR CARDHOLDERS UNDER 18 YEARS OF AGE: Illinois law requires the signature of a parent or guardian when application for a library card is made by persons 17 years of age or under. I accept responsibility for the use of Library resources by this child(ren). I further agree that I will personally be responsible for all financial charges imposed against said minor(s).

Name of Parent/Guardian _____

PLEASE PRINT