



Cardholder Agreement

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

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:** _____

Notices: (Choose one)

- Email
- Text Carrier _____
- USPS Mail
- Phone

Signature _____

Additional minors:

Minor #1 _____ **Card #** _____
Last First Initial Birthdate

Minor #2 _____ **Card #** _____
Last First Initial Birthdate

Minor #3 _____ **Card #** _____
Last First Initial Birthdate

Minor #4 _____ **Card #** _____
Last First Initial Birthdate

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

Signature of Parent/Guardian _____