



600 S. JOHNSTONE
BARTLESVILLE, OKLAHOMA 74003

APPLICATION FOR LIBRARY CARD

By signing this form, I agree to abide by the rules of the Bartlesville Public Library and accept responsibility for all materials checked out to this card. I also acknowledge:

1. That accounts with items 45 days overdue and/or owing \$25.00 or more in charges are turned over for collection, and that a \$20.00 fee will be added to such accounts, and
2. That this card provides unfiltered access to all library materials, print, electronic, and all other formats.

Last Name _____ First Name _____ Middle Name _____

Physical Street Address _____

PO Box _____ or Apt. Number _____ (Physical address is required even if you use the PO Box Number)

City _____ State _____ Zip Code _____

Area Code & Phone Number: (____) _____ Cell Phone Number (____) _____

E-Mail Address _____

(Home Phone Number Is Required. If you do not live in Bartlesville, Dewey, or Copan, Area Code Is Needed.)
(Staff: for long distance, enter 1AreaCodeNumber,,,798 example 14053361035,,,798)

Date of Birth _____ Drivers License Number _____ Last 4 digits of SSN _____

Signature of Applicant _____

College students permanent address: (Home address is required)

Address: _____

City: _____ State: _____ Zip Code: _____

Area Code & Phone Number: _____

IF UNDER 18:

Date of Birth: Month _____ Day _____ Year _____

Parent/Guardian: (Please Print) _____

Parent/Guardian Signature: _____

⇒ By signing, I give access to all library material for this minor.

⇒ Do you want your child to have access to the Internet? Yes _____ No _____

Parent/Guardian Driver's License _____ last 4 digits of SSN _____

- Area Resident Non-Resident (\$25 Non-refundable Annual Fee) No access to online databases
- Temporary (living here 6 months or less \$25 refundable deposit-expires 6 months after issue)

Do you want to receive notices by phone or e-mail or text? If text-name of carrier _____

For Library Use: _____
Barcode Number Issued

_____ Date

_____ Clerk's Initials