RUSSELL PUBLIC LIBRARY

Library Card Application

Please print legibly

There are many libraries within the Central Kansas Library System in which you can check out materials. Will the Russell Public Library be your home library? Yes_____ No_____ (If not, please speak to a clerk before you continue with this application.)

Full Name: _____
First Middle Last

Date of Birth: _____

Home Address: _____

City: _____State:_____Zip:_____

Phone Number: _____ Email Address: _____

I apply for the right to use the Library and agree to comply with all its rules and regulations and to be responsible for all materials I or my minor child check out. I agree to the Russell Public Library's Internet Safety Policy and Patron Behavior Code of Conduct. I agree to abide by them and any amendments adopted by the Library Board of Directors. (Current and up-to-date guidelines will be made available upon request.) I understand that the library has no control over the information accessed via its internet connection and that parents/guardians are responsible for the information accessed by their minor children. I understand that violation of the Russell Public Library's Internet Access Guidelines will result in the permanent loss of computer privileges at the library.

Patron Name: _____

Patron Signature: _____

Parent/Guardian Name: (if under 17): _____

Parent/Guardian Signature: (if under 17): _____

Library Staff Use Only:

Library Card Number: _____

Date: _____ Material used for verification of address: _____

Staff initials: _____