



**FOR STAFF USE ONLY**

[Barcode Field]

(barcode)

[APATID Field] [Staff Initials Field]

(APATID) (Staff Initials)

**Last Name** ..... **First Name** ..... **Middle Name** .....

**Street Address** .....

*PO Box (if applicable)* .....

**City/Town** ..... **ZIP Code** .....

**Phone** ..... **Alternate Phone** .....

**Email** ..... **PIN** .....

**Birth Month** ..... **Birth Day** ..... **Birth Year** .....

**PLEASE CHECK ONE:**  female  male  not specified

**BY COMPLETING THIS FORM, YOU ACKNOWLEDGE AND UNDERSTAND  
THAT YOU WILL BE RESPONSIBLE FOR ALL USE MADE OF YOUR LIBRARY CARD.**