

604 Liberty Street Morris, Illinois 60450 (815) 942-6880

www.morrislibrary.com

LIBRARY CARD APPLICATION

Last Name:	First	Name:			MI:						
Current Address:	•						•				
City:	Zip Cod		Date	of Birth: (r	must be	18 0	r older)				
Email address:											
Primary Phone:			Notification Option (circle one): EMAIL AUTOMATED PHONE CALL								
Authorized to Pick Up Holds: The following behalf. I understand that they may be aske					to pick up	materia	als on	my			
Full Name:		Relationship:									
Full Name:		Relationship:									
Full Name:		Relationship:									
By accepting this card from the Morris Area and procedures with regard to Library facili information has changed or if this card is loundeliverable notices and unauthorized changes.	ities, ma ost, I am	terials, fi	nes, a	and s	ervices. If	my conf	tact				
Cardholder Signature:		Date:									
STAFF USE ONLY ADULT Barcode Issued:											
2 9 9 5 7											
MINOR CARD ISSUED ONLY: Picture ID: YES NO		Proof of Addr	ess:	V	erified within bo		Sta	aff Initials			

N/A	A :	2	9	9	5	7										
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Α	Child's Last Name:					Child's First Name				Child's MI: Child's Birthdate: Child's Age						
В	Child's Last Name:					Child's First Name				Child's MI: Child's Birthdate: Child's Age						
С	Child's Last Name:				Cl	Child's First Name				Child's MI: Child's Birthdate: Child's Age						
D	Child's Last Name:				Cl	Child's First Name				Child's MI: Child's Birthdate: Child's Age						
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Parent/Guardian Signature:									Date:							
use 1	the Li	brar	y com	outers	with int	ernet a	ccess			•		tween the	_			
under 11 or you do not wish to give permission. Parent/Guardian Signature:									Date:							
Barc	ode I	SSU	ed:				STAF	F USE	ONLY	,						
Α	2	2	9	9	5	7										
В	:	2	9	9	5	7										
С	:	2	9	9	5	7										
D	;	2	9	9	5	7										
E		2	9	9	5	7										
linked	Patrons			<u> </u>				ı				Charles	ad by Supa	rvisor		
Linked Patrons YES NO												Olicoke	Checked by Supervisor			

Parent/Guardian Library Account