Grace A. Dow Memorial Library
Card Application

Name: ___________________________________________

Please print (Last) (First) (middle Initial)

Apt. # or P.O. Box: __________________________________

Street Address: ______________________________________

City: ______________ State: __________ Zip: ______________

Home Phone: ______________ Work Phone: ______________ Date of Birth: __________

Sex: ______ County You live in: ______________ Township: ______________

Driver’s License or Michigan ID # ______________________________ Today’s Date: __________

Your Signature: __________________________________________

Special Parental Permission:
The above child (younger than 18) has my permission to check out videos on his/her own card. Yes ☐ No ☐

I hereby accept full responsibility for return of any and all library materials checked out by the above-named child, as well as liability for payment for the child's overdue fines and damaged or lost materials.

Signature of Parent or Legal Guardian: __________________________

************************************************************ E-mail Notification ************************************************************

By E-mail you will receive: 1st overdue notice; 2nd overdue notice; noticed of unresolved charges; hold noticed; hold cancelled notices. By U.S. Mail you will receive: Final Notices

This is an automated message service. Please do not reply to the automated e-mail messages you receive.

Please be aware that if you share this e-mail address with anyone they will have access to the information sent.

Patrons can only change their own address and the address of minor children for which they are listed as parents or legal guardians.

Patrons are responsible for notifying the library of any e-mail address changes and are responsible for all fines and fees even if their e-mail is undeliverable.

E-Mail Address: __________________________________________

Signature of E-mail recipient: __________________________________________

Signature of Parent or Guardian: __________________________________________

FOR OFFICE USE ONLY

E-mail Verified: _______ Township Verified: _______ P. Type: _______ P. Stats Gender: _______

Barcode#: ___________________________ Internet Access: _______ P. Stats. Geog: _______

Replacement Y__N__ MIWWW__ MIJUV__ P. Stats. Age: _______

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