



Library Card Registration

Applicant Information	
First name and middle initial:	
Last name:	
Phone number:	
Email:	
Would you like to receive library notifications by email (holds, pre-overdue, overdue)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address: _____ _____	
City, Province: _____	
Postal code: _____	
Date of birth: _____ / _____ / _____ (day/month/year)	
Parent/Guardian (for patrons 12 and under): Name: _____ <input type="checkbox"/> As a parent/guardian of this child, I understand that children have access to all library materials, including adult audio/visual and digital materials, and I accept responsibility for my child's selections, use and return of all materials.	

I accept responsibility for all library materials borrowed with this card and will observe the rules of the Library.

Signature: _____

Date: _____

Privacy

Personal information on this form is collected under the authority of the Freedom of Information and Protection of Privacy Act, 1989 and shall not be used or disclosed for purposes other than West Perth Public Library transactions. Personal information shall be retained only for the period of time required to fulfill the purposes for which it was collected. Personal information shall be protected by safeguards that are appropriate for the sensitivity of the information collected. Questions regarding the collection of this information should be directed to the Library CEO.

For Library Use Only

Database check

Patron barcode:

Identification:

Driver's license Student ID Tax or Rent Receipt Utilities Invoice

Other (please specify): _____

Library staff initials: