

**Application for Community Library Card**  
(Ages 16 and Up)

Check-Out Privileges: Community users may check out up to 3 books from the Library’s general collection for 28 days. Borrowers assume all responsibility for library items in their possession and will be subject to charges for any lost and/or damaged items.

<b>Please print clearly and provide all information requested.</b>			
Last Name		First Name	
Middle Name/Initial		Date of Birth (MM/DD/YYYY)	
Street Address			
Apt. #	City	State	Zip
Home Phone		Cell Phone	
Mailing address (if different from above)			
E-mail Address			
School name (High School Students Only)			
<b>Please read this section carefully and sign below to indicate your agreement.</b>			
<b>By submitting this application, I declare that all information provided is accurate.</b>			
<b>I agree to accept responsibility for all use of the card and all materials checked out on the card.</b>			
<b>I understand that failure to return library property may result in loss of privileges.</b>			
<b>I understand that the use of my library card is non-transferrable and in the event the card is lost or stolen I will notify the library immediately.</b>			
Applicant's Signature			Date

Ark. Code Ann. §§ 13-2-701 to -704 prohibits the disclosure of library records—including but not limited to personally identifying information, materials used, reference queries, or other information—to anyone except the registered patron. (See 13-2-704 for limited, prescribed exceptions.)

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(For Official Use Only)

Staff Initials \_\_\_\_\_

Assigned Library Card # \_\_\_\_\_