LIBRARY CARD APPLICATION

You will need to present photo identification and proof of your current address. If you are under the age of 18, a parent or legal guardian will need to be present to make this application.

Full legal name:

_____

Last First Middle M/F Birthdate

_____

Residence address Apt # City Zip

_____

Mailing address if different City Zip

_____

E-Mail address

Home phone_____-_____ Work Phone_____-_____

I would like to checkout videos and agree to follow video checkout policies. **Y☐N☐**

By applying for a card(s), I hereby affirm that information supplied on this application is true and correct. I agree to abide by all policies and procedures of BPL and to pay any and all fines costs and fees (including the cost of collections service if required) incurred by the use of the above card(s).

_____

Signature

SS/DL#_____

OTHER FAMILY MEMBERS

Please indicate Yes or No for Video checkout for each additional applicant.

Full Legal Names for all:

Last	**First**	**Middle**	**M/F**	**Birthdate**	**Video Y**	**N**

BOISE PUBLIC LIBRARY
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