Welcome to the Spring Hill Public Library!

JUVENILE LIBRARY CARD APPLICATION (6-17)

Last Name:

First Name: **Middle Name:**

Street Address:

City: **ST:** **ZIP:**

County: Maury County Williamson County Other:_____

If you have a Thompson's Station address, do you live in the Spring Hill city limits? Yes No

Telephone: - - **Birthdate:** / /

Email address:

Account & Notification Preferences *(PIN defaults to last 4 digits of phone number)*

Which receipt type would you prefer at checkout? Emailed Printed

Preferred method for holds notices? Emailed Phone Call

Would you like to maintain a record of the items you've checked out? This will be viewable only by using your **library card number & pin**. If you say yes, please be advised that under some circumstances, law enforcement agencies with a valid warrant may request access to your reading list.

Yes, maintain my reading list *No, do not maintain my reading list*

Juvenile Library User Agreement

Parents or legal guardians who meet the residence/workplace requirements may set up cards in their dependents' names. The library maintains a policy manual that is available for inspection at any time by request or on the library's website. By signing this application, the applicant and parent/legal guardian agree to abide by the published policies. Among these policies are:

- Parents/legal guardians are the owners of and are considered the borrowers with regards to juvenile cards, are responsible for all material borrowed, and have full access to those library account records.
- Library cards grant all ages access to our public computers. Computers have CIPA-compliant internet filters, but it is the responsibility of the parent/guardian to monitor juvenile computer use.
- The library charges fines for material kept past the due date and may refuse further service until overdue materials are returned and account balances are paid.
- It is your responsibility to report changes of address or contact information and lost library cards.
- The library emails newsletters to all account holders. You may unsubscribe at any time.

_____ _____

Juvenile signature ***Date***

_____ _____ _____

Parent/Guardian signature ***Relationship to juvenile*** ***Date***

For staff use: P/G ID Type _____ Juv Barcode _____ Additional proof of residence _____

P/G Name _____ P/G Barcode _____ Staff Initials_____