Walla Walla County Rural Library District
LIBRARY CARD REGISTRATION FORM *for a Child* (under age 18)

Child's PERSONAL INFORMATION

Last Name _____ First Name _____ Middle Name _____

☐ Male ☐ Female Birth Date: MM ____ DD ____ YYYY ____

Parent or Guardian's PERSONAL INFORMATION *(Please present valid identification with your current address.)*

Last Name _____ First Name _____ Middle Name _____

Do you have a WALNET library card? ☐ Yes ☐ No

STAFF USE ONLY: Parent/Guardian Barcode
24388 __ __ __ __ __ __ __ __ __

Parent or Guardian's MAILING ADDRESS

Street or PO Box _____ City _____ State _____ Zip Code _____

Parent or Guardian's RESIDENTIAL ADDRESS ☐ **Same as Mailing Address**

Street Address _____ City _____ State _____ Zip Code _____

CONTACT INFORMATION

Primary Phone _____ Alternate Phone _____

Email Address *(for notification when items are overdue or available for pick-up)* _____

Would you like to receive email reminders about events at the library? ☐ Yes ☐ No

RESPONSIBILITY STATEMENT

I agree to follow the rules of the Walla Walla County Rural Library District and to pay all costs and/or service charges for materials that are lost or damaged. I understand that failure to follow library rules may result in suspension of my library privileges and/or referral to a collection agency. Library rules and library materials are governed and protected by State law. If I am referred to a collection agency because materials have not been returned or have been returned damaged, I will be charged an additional recovery fee. I understand and agree that any court action regarding my account shall be in Walla Walla County and, if a lawsuit is required, I agree to pay reasonable attorney's fees and costs.

Signature of Parent or Guardian *(required)* _____ Today's Date _____

STAFF USE ONLY | Registered at: ☐ Burbank ☐ Prescott ☐ Touchet ☐ Vista Hermosa ☐ Plaza
Barcode: 24388 __ __ __ __ __ __ __ __ __ | Registration date: ___/___/___ | Staff Initials: _____
Data Entry Review: Review date: ___/___/___ | Reviewer Initials: _____ | Form revised September 2013