

IBERIA PARISH LIBRARIES
Adult Registration (18 Yrs. and Above)

Please **PRINT** and fill in form **COMPLETELY** for a library card to be issued.

Name: _____
Last First M. Suffix

Mailing Address: _____
No. Street Apt# City State Zip

Home Address (if different): _____

Phone: _____
Home Work Mobile

How would you prefer to receive library notices: Mail Email: _____

Password/PIN#: _____
(Enter the last 4 digits of your phone # here. This is the password you will use to access library internet services)

LIBRARY POLICY: "Information required to obtain/continue use of a library card includes, but is not limited to, the last four digits of your Social Security Number, birth date, and driver's license number (when applicable)."

DATE OF BIRTH: _____

SOCIAL SECURITY # (Last 4 digits only): _ _ _ _

DRIVER'S LICENSE (if applicable): _____

PLACE OF EMPLOYMENT/SCHOOL: _____

- Please do not loan your library card to friends or relatives as you are ultimately responsible. Your library card is just like a credit card. Items are loaned to you and are expected to be returned in a timely manner. If not, late fees and/or replacement fees can be assessed to the account. In the event of non-payment, accounts are sent to a collection agency for collection.

-Please report lost or stolen cards immediately as you are responsible for all items checked out on your card.

-Please notify the library of any change of address.

I AGREE TO BE RESPONSIBLE FOR ALL MATERIALS CHECKED OUT TO THIS CARD AND TO OBEY ALL LIBRARY RULES.

Borrower's Signature

Employee Name: _____ **Date:** _____
(PRINT)