IBERIA PARISH LIBRARIES

Young Adult Registration (13-17 Yrs.)

Please <u>PRINT</u> and fill in form <u>COMPLETELY</u> for a library card to be issued.

The Young Adult card is a Level 2 restriction, indicating that your teen will not have access to Digital services and the Adult print collection. If you would prefer to lift these restrictions, check the box below.

I DO NOT WANT MY CHILD'S LIBRARY ACCESS RESTRICTED

Name:					
	Last	First		М.	Suffix
Mailing Addres	SS:				
Ū	No.	Street	Apt#	City	State Zip
Home Address	S (if different):				

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):	

I understand that the physical and digital Teen Collections may contain mature themes, such as strong language, violence, and/or sexual situations.

PARENT OR GUARDIAN:

	Last	First	Mie	ddle
Mailing Address (if different): _				·····
Home Address (if different):				
Phone: How would you prefer to rec	<i>Mobile</i> eive library			C Email Address
Place of Employment				
DRIVER'S LICENSE		SSN# (last 4#s):		
like a credit card. Items are loand replacement fees are assessed to collection. -Please report lost or stolen cards -Please notify the library of any c	the account. I	in the event of non-payment, acc as you are responsible for all ite	counts are sent to a	a collection agency for
I AGREE TO OBEY ALL LIBRARY R	JLES		Вс	orrower's Signature
I AGREE TO BE RESPONSIBLE FOR CHECKED OUT TO THE ABOVE PER		NLS	Parent/G	uardian's Signature

Employee Name: _____

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