LIBRARY CARD APPLICATION
ADULT

EFFINGHAM PUBLIC LIBRARY

First, Middle and Last Name:____ (PLEASE PRINT)
Maiden Name:____
(as it appears on your photo ID or DL)
Street Address:____
(Please No P.O. Boxes)
City, State, ZIP:____
Phone #:____________________________________ **Birth date:**___________________________

Please CHECK ONE below. This is how the library will contact you.
____Text Message Cell Phone Service Provider (Ex: AT&T, Verizon, etc.)_____________________________
____E-Mail ____
(You will automatically receive **"almost overdue" notices if E-mail or Text Message** notification is chosen.)
______Yes, I would like to receive EPL's monthly **E-mail** newsletter.
_____ Yes, I would like to receive **E-mail** notification of new items added to the library collection.
_____ Phone ______________________________________

PIN #: ________ (4 digits to remember/use to access your online account & to check out items)

Full Driver's License # OR State ID #(if other than IL please indicate the state):___________________

An Effingham Public Library Card entitles you to borrow materials from the Effingham Public Library. By using the card, you agree to comply with all the rules and regulations of the Effingham Public Library, including the Internet rules, and to pay any and all overdue fines and charges for lost, stolen, or damaged materials. This also applies to any Interlibrary Loan items. Please report a lost or stolen card and any address changes. **The Effingham Public Library is not responsible for the unauthorized use of the library card.** Failure to comply with the library rules may result in the suspension of borrowing privileges.
Required fields.

Signature: ____ Date: ______________

FOR STAFF USE ONLY: ____searched by Name/Maiden name Staff Initials:_____ Date:________
_______ Resident Adult ____ Non-Res. Adult
>>>
*______ Non-Res. Property Owner
*Taxable Address for Non-Resident Property Owner ____
>>>
**_____Reciprocal
** Home Library Name and Barcode:____
**Home Library Expiration Date:_____________________
Barcode: ____ Address Check/Expiration: _____________