Merlin Consortium Library Card Registration

Children 5 and older can receive their own library cards. Lost library cards can be replaced for \$3.00.

Date (MM-DD-YYYY):								
NOTE – Your library card will e	•		our card an	d can be	renewed .	You may	contact your	
home library to renew your ca	rd as the date appro	aches.						
Name (ALL CAPS):								
Last		First			Full Middle	е		
Birthdate (MM-DD-YYYY):								
County:	ounty: Township:				_			
Applicant Mailing Address: _					•			
, pp	Address	•	City		······································	State	Zip Code	
What type of address is this	(circle one)? Pe	ermanent	Vacatio	n Home	Ou	t of state	•	
If you circled anything but p	ermanent, please i	include ar	ı alternate :	address	:			
Address	City		9	State	Zip Code			
Main Phone Number (111-1	11-1111):							
•								
Email Address (all lower cas	····							
Preferred form of contact fo	r overdue & hold n	otices (ci	rcle one):	phone ca	all – text n	nessage –	email message	
Responsible Party Name (if a	policant is a shild or	an adult w	uith a logal g	wardian	or carogive	\r\·		
nesponsible Party Name (II a	pplicant is a crilid of	an addit w	vitii a legal g	uaruiaii	or caregive	:1).		
First	Full Middle		Last					
11130	Tull Middle		Last					
Responsible Party Address:						·		
	Address		City			State	Zip Code	
Individuals are limited to one card in proof of identity and residence. A drive the guidelines from the Wisconsin Progresidence). Residents, property own provide the same services to all reside borrow items from my home library to other libraries in the Merlin Consortic libraries. Applicants under 18 years or responsible party for the card. The reinternet use. The responsible party multiple that the information read and agree to the terms	vers' license, state identification of Residence for Vote ers, and visitors to the arents and property owner, that I agree to the lending of agree to the lending of age or adults with a leg sponsible party is ultimat ust provide contact infor	fication card, ar Registration tea are eligibles of the Nort gand fine rulean, that I am gal guardian elely responsionation and series corrections.	or student ID or guide (election guide) (election guide) et a apply for a hern Waters Lies of my home agreeing to the or caregiver moble for any late sign the card apple for a guide).	may be use ons.wi.gov a library ca brary Serv library. It e lending a ust have a fees, lost oplication	ed, or library /publications /	staff may v /voter-guid ry in the M residents. Ind that wh from those dian, or oth the card an	erify residence using les/proof-of- lerlin Consortium shall I understand when I en I borrow items fror emember er adult serve as the id supervision of	
Printed Name:		Sig	nature				Date	_
merlin Serving librarie	s in Ashland, Bayfield. B	umett, Doug	glas, Iron, Saw	yer, Vilas,	and Washbu	rn counties	in northern Wisconsi	n.

Office Use Only Verified: Y N Staff initials: ____ ID Data entry checked for accuracy and duplicates (staff initials): ___