

JACKSON/HINDS LIBRARY SYSTEM : LIBRARY CARD APPLICATION.



**STAFF TO COMPLETE THE FOLLOWING INFORMATION**

**LIBRARY      CARD I.D.      PROFILE NAME:**

**LIBRARY CARD APPLICANT TO COMPLETE THE FOLLOWING INFORMATION. Please print**

FORM OF I.D.

DRIVER'S LICENSE #

DATE OF BIRTH mm/dd/yyyy

TITLE

FULL FIRST NAME

FULL MIDDLE NAME

FULL LAST NAME

PREFERRED NAME

Use Preferred Name

SUFFIX

**ADDRESS 1**

HOMEPHONE

CELL PHONE

ADDRESS

CITY & COUNTY

STATE & ZIP

Mailing Address if Different from Above

EMAIL:

**ADDRESS 2**

WORKPHONE

COMPANY & ADDRESS

CITY & COUNTY

STATE & ZIP

If cardholder is below the age of 18, please print Name and Primary Phone Number of Parent or Guardian.

Patrons may not check out materials without a Library Card.

There is no Library Card fee for residents of Hinds County.

Residents of other counties are charged as follows: Single resident - \$25.00 per year; Family (spouse and dependents in household residence) - \$50.00 per year

One (1) Name and Residential Address proof of identification is required, such as:

Valid Drivers License

Most Recent Utility Bill(s)

Printed Bank Checks

Voter Registration Card

Recent Rent Receipts or Residential Lease

Automobile Registration

Official Mail Addressed to Applicant

Received in the last 30 days, e.g. Bank Statement, Insurance Bill, etc.

Please advise staff of any change of address and provide proof of address of new residence (as above)

**You are responsible for all materials checked out on your card. Therefore it is important to notify staff if your card is lost or stolen.**

**I HAVE READ THESE REQUIREMENTS FOR A LIBRARY CARD, AND I AGREE TO ABIDE BY THEM.**

**Signature of Applicant or signature of parent/guardian if applicant is under 18 years of age.**

Name of staff member processing this Library Card Application:

Branch:

