

- 1. Fill out this form (ages 12-17 years)
- Bring the completed application, with photo ID and proof of current address, to any branch of the Chicopee Public Library. If you do not have ID, your parent or legal guardian can come with you to provide their ID.

YOUNG ADULT LIBRARY CARD APPLICATION

PLEASE PRINT				
Legal Name, Last: _				_
First:	:: Middle :			_
Preferred Name:				
[Pate of birth/_	/	(mm/dd/yyyy)	
Parent/Legal Guardi	an Name:			
Mailing Address:			A	.pt #:
City / State:			ZIF	?:
Residential Address	(If different from above	e):		
Parent's Address (If	different from above):			
Primary Phone #: ()			
Secondary Phone #:	()			
Email Address for	notifications:			
(You'll get an email	when holds are in <u>and</u> e	email notificati	ons about due dates	and renewals)
☐ YES! I want to rec	eive my checkout receipt	s via email ins	tead of getting a physi	ical printout
Text notifications:	Cell #: ()	_ -	_	
(You'll get a text wh	en holds are in—Norma	l text rates an	nlv)	

By Applying for a Library Card You Agree:

- If the parent/guardian is not present, notification will be mailed to the above address to verify that this information is correct and to confirm financial responsibility for materials borrowed or for charges incurred on the library card issued with this application.
- I will comply with the rules of the Chicopee Public Library and CWMARS member libraries. I understand that this card is not transferable and may not be used by another person.