

ID # (last 6 digits)	APPLICATION FOR DELTA TOWNSHIP DISTRICT LIBRARY BORROWER'S CARD- ADULT <i>Please Print Information Below</i>		<i>For office use only</i>
Last Name	First Name	Middle Initial	RJC062018 3000
Address		City	
Township and County		Picture I.D.	
E-Mail Address		Phone (Preferred)	Phone for text notification
I authorize the following people to check out my holds on my card:		I authorize the following people to have access to my library records:	
RESPONSIBILITY STATEMENT: I assume all responsibility for damage or replacement of library materials and late fees while under loan to me. I also understand that borrowing privileges may be revoked if materials are returned late. I acknowledge these materials are for home or private use; not for public performance, and may not be duplicated. Any abuse of these rules is a violation of the copyright law. I understand that I may be asked at any time to show my library card and current picture I.D.			
Signature		Date	

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