

Please Print Clearl

Arrowhead Library System Application for Borrower's Card

Last Name	First N	lame		Middle Name o	or Initial	Birthdate (mm/dd/yyyy)	
Permanent Mailing Address		City, Stat	te, Zip		Т	ownship	
County Secondary Address? Please include on back			Felephone #	1 Home Cell Wo	ork Te	elephone #2 Home Cell Work	
Circle ONE Library Notice Opt	NE Library Notice Option Email Address				Due Date Slip?		
Phone Text Em	ail				Paper and/or Email		
I will be responsible for all materials borrowed on this card Signature of Applicant Date							
For Applicants under 18: Signature of guardian financially responsible for items checked out on this card							
Signature Date							
Print Guardian's Name	Guardian's E			Card is in good standing Plan is arranged – see back of form			
For Library Use Only: New to ALS Renew Change Information	ID and Address License Bill Other	Verification	: Barcode	#		Todays date: Staff initials:	

Secondary Mailing Address		City, State, Zip	Township, if you live outside city limits
County	Other		

Data Privacy. According to the Minnesota Government Data Practices Act, library users must be informed of what private data is being collected, its uses and disposition (sometimes referred to as the "Tennessen warning"). By Minnesota law, information you provide in applying for a library card, except your name, as well as information which links your name with library materials is private. It is available only to you and to appropriate library personnel. This information is required to support library services. You are not legally required to provide the information on the application, but you will not receive a library card if you do not fill out the information on the application. The information in the application must be released pursuant to a court order.