

REGISTRATION FORM AND RESPONSIBILITY AGREEMENT

Please have the following ready: photo identification and proof of current New Britain Street address.

PLEASE PRINT LEGIBLY.

Name

Address	New Britain, CT 0605
Telephone number	
Date of Birth	
Month/Day/Year	
\square I would like to register to vote	
Email address	
Your email address will not be shared with outside parties; it will be used for	or library business only.
I would like to subscribe to the following email notifications (check all tha	t apply):
\square Notices: hold available, items almost due and overdue materials	
☐ Email Newsletter ☐ Adult Programs ☐ Teen Programs ☐ Children's P	rograms
PLEASE READ CAREFULLY AND SIGN	
I understand that when I am issued a library card, I am responsible for good condition. If materials are damaged or lost, it is my responsibility the Library is not responsible for damage to electronic equipment, an minors' use of all library resources and materials. I agree not to lend to fany change of address or phone number. This card will expire in the a replacement card.	y to pay replacement fees. I understand that d that parents/guardians are responsible for this card to anyone and to inform the library
Applicant's Signature	

Parent's or Legal Guardian's Name (For children under 18 years):

FOR LIBRARY USE ONLY

		TOR LIBRAR	I OSE ONET		
Applicant barcode 2250	8				
Non-connect barcode					
NEW RENI	EWAL				
Adult Child	Teen	Senior	Educator	Guest	
PARENT PRESENT: YES_	NO				
DATE	STAFF INITIALS	<u> </u>			