Edward U. Demmer Memorial Library Registration Form

LIBRARY CARD BARCODE: ______________________________

Have you had a card at a Wisconsin Valley Library Service (WVLS) Library before? Y / N

BIRTH DATE: _____/_____/

NOTICE PREFERENCE: PHONE or EMAIL

NAME: _____________________________________________________________________________

Last       First       Middle Initial

LOCAL ADDRESS: __________________________________________________________________

Street/Road #       City       State       Zip

COUNTY: ______________________ MUNICIPALITY [town / city of]: ______________________

LOCAL P.O. BOX #: __________  Do you receive mail at above address? Y / N

SEASONAL ADDRESS – If you are a seasonal resident, please list your seasonal address below

Home Address: __________________________________________________

Street/Road #       City       State       Zip

PHONE: ___________________________ OTHER PHONE: ___________________________

DRIVER’S LICENSE #: ___________________________ STATE: __________

EMAIL (OPTIONAL): ____________________________________________________________

PIN: ____________ Your PIN will be the last four digits of your primary phone number.

I agree to obey all rules and regulations of the library, to pay promptly all charges incurred by this card
and to give immediate notice of any change of address and/or name change or card loss.

Signature: ___________________________ Date: _________________

If applicant is under 18 years of age, please provide the following information:

Please Print

Parent/Guardian’s Name: ______________________________________________________ Phone: ______________________

Mailing Address: _____________________________________________________________

Street/Road #       City       State       Zip

As the parent or guardian, I realize that I am responsible for the selection and return of materials borrowed, as well as
fines incurred by the minor child to whom this card is issued.

Parent/Guardian’s Signature: ___________________________ Date: _________________

See other side for the library INTERNET USAGE AGREEMENT for minors.
INTERNET USAGE AGREEMENT FOR MINORS

Applicants less than 18 years of age should complete this section and have their parent/guardian sign

I, ______________________________________ (please print), have received the Internet Acceptable Use Policy provided by the Edward U. Demmer Memorial Library and have read and understood the information included.

I further acknowledge that the Demmer Library does not monitor and has no control over the information accessed through the Internet and cannot be held responsible for its content.

I agree to follow all rules and regulations, implied or stated, in the Internet Acceptable Use Policy. I realize that not following these rules and regulations may result in loss of Internet privileges. I further acknowledge and agree that the Demmer Memorial Library assumes no liability for any loss or damage to the user’s data or for any damage or injury arising from the invasion of privacy in the user’s computer accounts, programs, or files.

User Signature: ___________________________ Date: ___________________

PARENT OR LEGAL GUARDIAN:

For users under the age 18, a parent or legal guardian must also sign this agreement showing that they have approved the same terms and conditions as agreed to by the minor.

I, as parent or guardian, assume responsibility for the **above-named child** in the use of the Library Internet access computer. I am aware that my child may access material that in my absence may be inappropriate.

**Do you give permission for your child to use the Internet in the Library?**  Y / N

Parent/Guardian’s Signature: ___________________________ Date: ___________________