



Application for Watertown Public Library Borrower's Card



Name: \_\_\_\_\_  
Last Name (print) First Name Middle Name

Local Address: \_\_\_\_\_  
Number and Street Apt. #

City/Village: \_\_\_\_\_ State : \_\_\_\_\_ Zip Code: \_\_\_\_\_

County: \_\_\_\_\_ Township (If you live outside city/township limits): \_\_\_\_\_

Phone: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ DL # \_\_\_\_\_

Would you like internet access Y \_\_\_ N \_\_\_

**Student or Applicant Information (If different from above):**

Number and Street: \_\_\_\_\_

DL #/I.D. : \_\_\_\_\_

City/Village: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

How would you like to receive information about this account? If you sign up for email or text messages, you will also receive courtesy notices before items are due and before your library card expires.

**Text is offered in addition to phone or email.**  
**A phone and email combination is not an option**

- Phone: \_\_\_\_\_
- E-mail: \_\_\_\_\_  
I understand that it is my responsibility to check my e-mail. I agree to notify the library when my e-mail address changes or I no longer want to receive notices by e-mail.
- Text Message: Cell Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cellular Service Provider: \_\_\_\_\_

Depending on your cell phone contract, you may be charged by your service providers for the text messaging service. The Watertown Public Library assumes no liability for any charges incurred for text messaging.

Would you like to receive email notification of our library monthly newsletter?  Yes  No

**Please read and sign below:**

I agree to obey all policies, rules, and regulations of the Watertown Public Library and to notify the library when any information I have given is changed (name, address, phone, e-mail address). I will be responsible for all charges incurred for any overdue, lost or damaged materials. In the event my card is stolen or lost I understand that I am responsible for all charges on it until I notify the library of its loss or theft. Library policies can be found on the library website (About) at [www.watertownpubliclibrary.org](http://www.watertownpubliclibrary.org)

\_\_\_\_\_  
Signature of applicant

X \_\_\_\_\_ X  
Signature of parent/ Legal guardian

X \_\_\_\_\_  
Relationship to applicant and Date of Birth

X \_\_\_\_\_  
Name of parent/guardian (please print)

INFORMATION GIVEN IS CONFIDENTIAL; PATRON PRIVACY IS PROTECTED PER WIS STATUTE CH 43.30  
THEFT OF LIBRARY MATERIALS WILL BE PURSUED PER Wis. State Statute 943.61

For Library Use:

Barcode: \_\_\_\_\_

Initial and Date