

Library Card Application

Library cards are issued free to residents of the city area. The Public Library participates in the State of Iowa Open Access Program, which may allow free cards to residents of other communities. Call us at 515-283-4152 for more information.

To obtain a card, fill in the form below (you can type the information on a computer and print out the form) and bring into one of our library locations. **To safeguard patron privacy, we require proof of current name and address and a photo I.D.**

Please Print

| | | | |
|---|--|--|---------------------------------|
| Last Name: | | | |
| First Name: | | Initial: | |
| Street Address: | | Apt. | |
| | | Lot: | |
| City: | | State: | Zip: |
| Birth Date: | | Gender: <input type="checkbox"/> Male | <input type="checkbox"/> Female |
| Contact Phone: | | Other Phone: | |
| Parent/Guardian (if under 18) | | | |
| Applicant's Social Security or Driver's License Number: | | | |
| When we need to contact you for holds or overdues, how do you prefer to be contacted? (Check One) | | | |
| <input type="checkbox"/> By Email (fastest) | | <input type="checkbox"/> By phone (next day) | |
| Email Address: | | | |
| Would you like to receive information on library programs and services? (Check One) | | | |
| <input type="checkbox"/> Yes, by email | | <input type="checkbox"/> No | |

Optional

| | | | |
|--------------------------------|--|-----------------------------|------------------------------------|
| Employer | | | |
| School (if currently enrolled) | | | |
| Education: | <input type="checkbox"/> High School/GED | <input type="checkbox"/> AA | <input type="checkbox"/> BA |
| | | | <input type="checkbox"/> Post-Grad |

The person whose signature appears below or his/her parent/guardian is responsible for all materials borrowed on this card.

| | | |
|---|--------------------------------------|---|
| I agree to: | Pay all fines or fees | Report loss or theft of my card promptly |
| | Abide by the policies of the library | Report change of name or address promptly |
| Signature | | |
| I authorize and assume responsibility for my minor child to borrow any library videos/DVDs: | | |
| Signature, Parent/Guardian | | |

| | | |
|---------------------------|---------|----------|
| OFFICE USE ONLY: Record # | Barcode | Initials |
|---------------------------|---------|----------|