

Noxubee County Public Library –Adult Library Card Application

Please print neatly and fill out form completely

Name: _____ Telephone/Cell phone: _____

Mailing Address: _____
(Street/Apartment number or P.O. Box) (City, State, Zip)

Age (circle): 18-44 45 and up

Place of employment: _____

Email address: _____

Yes, I would like to receive all library notices by E-mail (Please Check the Circle if YES)

- **Identification Required:**
- **Picture identification (current Mississippi driver's license or ID, Military ID, Passport, or Student ID),**
- **Proof of Address (current Mississippi driver's license, rental agreement, utility bill, or preprinted check),**
- **Signature Verification (Current Mississippi driver's license, Military ID, Passport, credit card).**

Address verified: _____yes _____no Photo# _____

***Library card number:** _____

____New Card _____Address Change _____Name Change
____Renewal _____Replacement _____Parent/Guardian/Adult record checked

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## Individual Computer User Agreement

As a user of the Library's computers to access the Internet and for general research purposes, I understand and will abide by the Computer/Internet Acceptable Use Policy. I agree to comply with the stated rules and understand that a violation will result in my access privileges being revoked and/or legal action may be taken.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff Initials: \_\_\_\_\_ Date Received: \_\_\_\_\_ Date Mailed: \_\_\_\_\_