## Newton Falls Public Library Application for Borrower's Card

204 South Canal Street Newton Falls, OH 44444 330-872-1282

LAST NAME	FIRST NAME		M.I.
STREET	CITY	STATE	ZIP
DATE OF BIRTH	RESIDENTIAL SCHOOL DISTRICT		
EMAIL ADDRESS	PHONE NUMBER		
PIN (4-8 CHARACTERS / CASE SENSITIV	VE)		
SIGNATURE OF APPLICANT OR PARENT/GUARDIAN OF MINOR	DATE OF BIRTH – PARENT/GUARDIAN		
DATE OF APPLICATION	BORROWER CARD NUMBER		

## **Borrower's Agreement**

## I will

- Be financially responsible for material borrowed with this card.
- Inform the library if my residence or email address changes.
- Monitor the material my child selects and checks out on this card.
- Pay all fees for the loss of or damage to materials borrowed with this card.
- Report a lost/stolen card immediately; I am solely responsible for lost/stolen items on my card until I report it lost/stolen.
- Agree to abide by the rules and regulations of the Newton Falls Public Library.
- My signature indicates acceptance of the terms outlined above.

## The library will

- Hold parent/guardian solely responsible for ensuring material borrowed by their child/ward is appropriate. The library's collection serves a wide diversity of customers and therefore contains material some feel is inappropriate.
- Hold parent/guardian of a minor (those age 17 and under) responsible for fees for the loss of or damage to materials borrowed with this card until the child is age 18.