ADULT
STILLWATER PUBLIC LIBRARY CARD APPLICATION

Photo I.D. and Proof of Street Address Required

- ADULT _____ COLLEGE STUDENT (over 18) _____
  - Mr. _____ Mrs. _____ Ms. _____ Dr. _____

NAME

<table>
<thead>
<tr>
<th>LAST</th>
<th>FIRST</th>
<th>MIDDLE NAME/ Initial</th>
</tr>
</thead>
</table>

USER ID

40630001 (For staff use only)

STAFF INITIALS

DATE:

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USER ID

40630001 (For staff use only)

STAFF INITIALS

DATE:

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DRIVER’S LICENSE # OR ALT ID #

<table>
<thead>
<tr>
<th>AREA CODE</th>
<th>STREET ADDRESS</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
</tr>
</thead>
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DATE OF BIRTH

M M D D Y Y Y

CONTACT PREFERENCE (MARK ONE)

PHONE _____ E-MAIL _____

PHONE NUMBER

<table>
<thead>
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<th>AREA CODE</th>
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</table>

E-MAIL

If you would like to receive the Library Newsletter via e-mail, please check here _____

ADDRESS (IF P.O. BOX, PROOF OF STREET ADDRESS REQUIRED. WRITE BELOW)

<table>
<thead>
<tr>
<th>STREET</th>
<th>Apt or Trailer Number</th>
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</thead>
</table>

STUDENTS AND TEMPORARY RESIDENTS: PERMANENT ADDRESS

OR ALTERNATE STREET ADDRESS FOR PATRONS WHO RECEIVE MAIL AT A P.O. BOX

<table>
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PLEASE CONTINUE ON OTHER SIDE
Release of Account Information

The Stillwater Public Library does not give out information about your use of the library and its resources without your permission. See Oklahoma Statute Title 65 Section 1-105 Disclosure of Records regarding confidentiality.

Fill out the box below only if you wish to grant access to your account information.

Listed below are people who may:

- Receive information on my account including, checkouts, holds, fees, and contact information.
  and
- Pick up items on reserve for my account.

________________________________  ______________________
Signature                                                                    Date

________________________________  ______________________

________________________________  ______________________

________________________________
Printed Name of Cardholder