FAMILY APPLICATION
STILLWATER PUBLIC LIBRARY CARDS
Photo I.D. and **Proof of Street Address** Required

ADULT 1 CARD

(For staff use only)
USER ID: 40630001_____
STAFF INITIALS:_____ DATE:_____

☐ ADULT ☐ COLLEGE STUDENT (over 18)

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Dr.

NAME

LAST FIRST MIDDLE NAME/ Initial

DRIVER'S LICENSE # OR ALT ID #

DATE OF BIRTH M M D D Y Y Y Y

PHONE NUMBER

CONTACT PREFERENCE (CHECK ONE)
☐ PHONE ☐ E-MAIL

E-MAIL If you would like to receive the Library Newsletter via e-mail, please check here: ☐

ADULT 2 CARD

(For staff use only)
USER ID: 40630001_____

☐ ADULT ☐ COLLEGE STUDENT (over 18)

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Dr.

NAME

LAST FIRST MIDDLE NAME/ Initial

DRIVER'S LICENSE # OR ALT ID #

DATE OF BIRTH M M D D Y Y Y Y

PHONE NUMBER

CONTACT PREFERENCE (CHECK ONE)
☐ PHONE ☐ E-MAIL

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 IS REQUIRED)

STREET APT / TRAILER NUMBER

CITY STATE ZIP CODE

- **IS THIS YOUR PERMANENT ADDRESS?** (CHECK ONE): ☐ YES ☐ NO

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.

People listed below may receive information on my account including checkouts, holds, fees, and contact information, and pick up items on reserve for my account. Leave blank if you do not wish to grant access to your account information.

_____ _____

Signature (Adult 1) (only needed if granting access to account) Date

Signature (Adult 2) (only needed if granting access to account) Date

Please provide requested information

Each child listed below will be issued a library card.

Computer Usage Information:

NO ACCESS: Child will not be allowed to use internet-connected computers
HIGH FILTER: Child may access Children's computers only; no access to email or social media
LOW FILTER: May use all other computers in the Library; access to email & social media

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CHILD 1 CARD

Staff: 40630001_____

NAME

LAST FIRST MIDDLE NAME/ Initial

Computer Usage (Select one level of internet access)

☐ No Access (No signature needed)
☐ High Filter
☐ Low Filter

DATE OF BIRTH

M M D D Y Y Y Y

☐ Mr. ☐ Miss

Child's signature: _____

CHILD 2 CARD

Staff: 40630001_____

NAME

LAST FIRST MIDDLE NAME/ Initial

Computer Usage (Select one level of internet access)

☐ No Access (No signature needed)
☐ High Filter
☐ Low Filter

DATE OF BIRTH

M M D D Y Y Y Y

☐ Mr. ☐ Miss

Child's signature: _____

CHILD 3 CARD

Staff: 40630001_____

NAME

LAST FIRST MIDDLE NAME/ Initial

Computer Usage (Select one level of internet access)

☐ No Access (No signature needed)
☐ High Filter
☐ Low Filter

DATE OF BIRTH

M M D D Y Y Y Y

☐ Mr. ☐ Miss

Child's signature: _____

Computer Use Consent:

I have read and understand the Stillwater Public Library's Computer Usage Policy and agree to its terms and conditions. I hereby release and hold harmless the City of Stillwater, its officers, agents, servants, or employees, volunteers, representatives, or advisors from any and all legal liability or responsibility for any and all claims, damages, losses, costs or expenses arising either directly or indirectly from the use of the Library's Internet terminals or wireless access whether or not caused in whole or in part, by alleged negligence of the City of Stillwater, its officers, agents, servants, employees, volunteers, representatives or advisors.

The signing adult is responsible for any items checked out on a child's card.

Parent's signature_____