

Apply for a Library Card



**Thunder Bay
Public Library**

Last Name: _____ Title (Mr, Mrs etc) _____

First Name(s): _____ Middle Name(s): _____

Address: _____

City/Province: _____ Postal Code: _____

E-mail Address: _____

Primary Phone #: _____ Cell Phone #: _____

Birth Date _____ Gender: _____
dd / mm / year

Languages Read: _____

Languages Spoken: _____

The signature of an adult (parent / legal guardian / caregiver) is required for minor applicants aged 13* and under *or any individual under a legal incapacity

I, _____,
(Please print - FIRST, MIDDLE AND LAST NAME OF APPLICANT or PARENT / LEGAL GUARDIAN / CAREGIVER)

- agree to follow the behaviour policy of the Thunder Bay Public Library Board
- agree to tell the Library if I change my address or if my card is lost or stolen
- agree to the terms of membership as listed in the membership guide and to be responsible for all materials & choice of materials for myself and any minor applicants

The personal information is used for library-related purposes only. It is collected in compliance with the Municipal Freedom of Information and Protection of Personal Privacy Act.

I certify that the information I have supplied on this form is correct.

Applicant's Signature Date

Parent / Legal Guardian / Caregiver Signature Date

Staff use only

Barcode

Initials