



## TEEN LIBRARY CARD APPLICATION (GRADES 6-12)

Name \_\_\_\_\_

Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ (Pin # is the last 4 digits of your Phone #)

Email \_\_\_\_\_ (NO SCHOOL EMAIL)

Grade in School: \_\_\_\_\_

Preferred Method of Notifications:

Email: \_\_\_\_\_

Text: \_\_\_\_\_ (Must have cell phone # on file)

Would you like to receive our newsletter by email? YES: \_\_\_\_\_ NO: \_\_\_\_\_

I accept responsibility for all materials borrowed on this card. I agree to provide immediate notice of address changes or loss of this card and pay all fees charged for lost or damaged materials.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**Please complete this form and present it along with ID that proves residency in the Village of Bronxville to the Circulation Desk.**

*For Library Staff Use Only:*

BARCODE: \_\_\_\_\_

Staff Initials: \_\_\_\_\_

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

**Bronxville Public Library 201 Pondfield Road Bronxville, NY 10708 (914)-337-7680  
www.bronxvillelibrary.org**