

PATRON REGISTRATION FORM

Please Print

NAME: LAST _____
FIRST _____
MIDDLE _____

City Resident _____ WVU Student 700#
County Resident _____
Child(5-12 yr) _____ Temporary Patron
Young Adult(13-17yr) _____ New Patron
Other County _____ Non-resident

LOCAL ADDRESS:

STREET _____
CITY _____
STATE _____ ZIP _____

PHONE # (Home) _____

PHONE # (Cell) _____

LAST 4 DIGITS SS# _____

BIRTHDATE (MM-DD-YY) _____

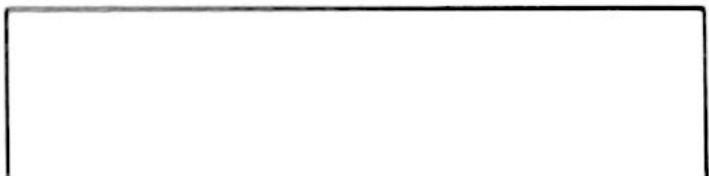
E-MAIL ADDRESS _____

If provided, all library notices will be sent to your email

SIGNATURE (FULL NAME)

By signing above, I agree to abide by the rules of the Morgantown Public Library.

BAR CODE:



EVERYONE MUST FILL OUT THIS SIDE

CONTACT If University student - Permanent home address

▶ **Must be different address and phone #** ◀

NAME _____

ADDRESS _____

CITY,ST,ZIP _____

PHONE _____

COMPLETE THIS SECTION FOR CHILDREN UNDER 18

PARENT'S NAME

print _____

sign _____

DRIVER'S LICENSE # _____

DR. LICENSE STATE _____

Staff Initials

Revised 09/07/2012