

PINES Library Patron Registration

**This information will be used for library purpose only and is considered confidential as specified by Georgia Code 24-9-46.**

First name \_\_\_\_\_  
Middle name \_\_\_\_\_  
Last name \_\_\_\_\_  
Suffix (Jr, Sr, MD, etc) \_\_\_\_\_  
Date of Birth \_\_\_\_\_ (YYYY-MM-DD)  
Parent/Guardian (if under 18 years old) \_\_\_\_\_

Identification: (please enter one ID number)  
Driver's license \_\_\_\_\_  
Social Security Number \_\_\_\_\_  
State-issued ID \_\_\_\_\_

Email Address \_\_\_\_\_  
Daytime phone (\_\_\_\_) \_\_\_\_\_  
Evening phone (\_\_\_\_) \_\_\_\_\_  
Cell/Other phone (\_\_\_\_) \_\_\_\_\_

Mailing Address  
Street \_\_\_\_\_  
City \_\_\_\_\_ Within city limits? Y/N  
County \_\_\_\_\_  
Zip \_\_\_\_\_

Physical Address  
Street \_\_\_\_\_  
City \_\_\_\_\_ Within city limits? Y/N  
County \_\_\_\_\_  
Zip \_\_\_\_\_

Other Address  
Street \_\_\_\_\_  
City \_\_\_\_\_ Within city limits? Y/N  
County \_\_\_\_\_  
Zip \_\_\_\_\_

Internet access requested: (please check one)  
Filtered\_\_\_\_ Unfiltered\_\_\_\_ None\_\_\_\_

Primary language: (please check one)  
English\_\_\_\_ Spanish\_\_\_\_ Other (please specify)\_\_\_\_

Would you like to register to vote today? (please check one)  
Yes, I would like to register today\_\_\_\_  
Already registered to vote\_\_\_\_  
Would like to take a voter registration form home with me\_\_\_\_  
No, thank you\_\_\_\_

**I apply for the right to use the Library, agree to comply with all its rules and regulations, and give immediate notice of any change of address.**

**I accept financial responsibility for all fines and/or damages to all Library materials, audiovisual materials and equipment beyond normal wear and tear, which is lost or damaged beyond use while checked out on my card. Under Georgia Code (OCGA Annotated Rev. 1985 20-5-53), failure to return items borrowed from a public library is considered a misdemeanor.**

**As the parent or guardian of a child 18 years or younger, I am willing to allow him/her to borrow materials from the Public Library. I will take responsibility and make good any charges or loss to library materials and pay any fine justly charged.**

**Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**Staff use: Barcode \_\_\_\_\_ Date registered \_\_\_\_\_ Initials \_\_\_\_\_**

