



**POMONA PUBLIC LIBRARY
CARD APPLICATION**

Please Check One: Adult Young Adult (14-17 yrs.) Child (13 yrs. & under)

Name: _____
 Last (Please Print) First Middle

Home Address: _____
 No. Street Apt.# City State Zip

Mailing Address _____

If Different: _____
 No. Street Apt.# City State Zip

Home Phone: _____ Cell Phone: _____

Name of Employer/School: _____

Language other than English spoken in the home:
 Spanish Vietnamese Chinese Other: _____

Please select your preferred choice of notification for overdue items and holds:

- E-Mail (fastest, both for overdues and holds) Address: _____
- Mail (overdues and holds)

I have received a copy of the Library's Rules and Regulations. By signing below, I agree to observe ALL Library Rules.

 Applicant's Signature

If under 18, PRINT name of Parent/Guardian: _____

If under 14, signature of Parent/Guardian: _____

STAFF ONLY: LC# _____ Parent's LC# _____ DL/

SS# _____ 2nd ID _____ Type _____ CSL Code _____

Geo. Code _____ NR Fee _____ Gen. _____ DOB _____ Exp. Date _____