

BUTLER PUBLIC LIBRARY - LIBRARY CARD APPLICATION

ALL INFORMATION IS CONFIDENTIAL. PATRON PRIVACY IS PROTECTED PER WISCONSIN
STATUTE CHAPTER 43.40

PLEASE PRINT

Last Name First Name Middle

Street Address

City/Town/Village State Zip Code

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Phone Number Date of Birth MM/DD/YEAR

PLEASE CHOOSE NOTIFICATION PREFERENCES (holds, date due reminders, overdues)

Email Address

Check here to Opt Out of periodic emails from the Butler Public Library

Cell Phone Provider Send Text (Y/N)
(Only needed if you wish to receive text message)

OR

Home Phone

PLEASE READ AND SIGN BELOW

I agree to comply with all policies, procedures, and regulations of the Butler Public Library, both present and future, and **to notify the library when any information I have provided is changed, or the card is lost.** I agree to be responsible for any materials drawn on the library card issued in the above name, including materials drawn on it by others without my consent unless I have previously reported the loss of my card. I will be responsible for any overdue, lost, or damaged materials including replacement costs. **I accept responsibility for the minor child (under 18 years of age) to whom this card is being issued.** In signing this application form, I am assuming legal responsibility for the proper use of, and the timely return of, all library materials. I understand the Library does **not** restrict access to any material by age and does not take responsibility for children's use of library materials.

Signature of Applicant _____ Date _____

IF APPLICANT IS UNDER 18: Parent or Legal Guardian is responsible for the selection and return of materials borrowed by the child to the whom the card is issued.

Applicant under 18 years of age COMPUTER/INTERNET PERMISSION (check one) YES NO

I give permission for my child to use the computers with Internet at the Butler Public Library. I understand that I am responsible for monitoring my child's appropriate use of the computers with Internet and that I am responsible for any damage that may occur. If the **YES** box is checked, I have received a copy of the Computer, Internet, & Wireless Use Policy.

Printed Name of Parent/Legal Guardian (of minor child under 18) _____

Signature of Parent/Legal Guardian _____ Date _____

Reverse Side - FOR LIBRARY USE ONLY

FOR LIBRARY USE ONLY

ID# CAFE _____ **Date Entry/ Initials** _____

Registered Library: **Butler** **Other Waukesha or Jefferson County Municipality** _____

Patron Code: **Adult** **Child** **Milwaukee** (\$40 fee collected) **Milwaukee Child** (\$40 fee collected)

Internet Only **Student** or **Teacher: School** _____

Butler Business: Employer _____

Verified by BPL Staff: _____ **Date:** _____

Shared Files →Card Application and Change Forms Folder →Final 2021 BU Card Application Word Document