



SANTA ANA PUBLIC LIBRARY



LIBRARY CARD APPLICATION

PLEASE PRINT NEATLY AND FILL OUT COMPLETELY.

NAME: _____
Last name First Name Middle Name

RESIDENTIAL ADDRESS: _____
Address Apt./Space # City State Zip Code

BIRTH DATE: _____ / _____ / _____
Month Day Year MALE: ☐ FEMALE: ☐

DRIVER LICENSE OR CA ID #: _____ PHONE: (_____) _____ - _____

E-MAIL ADDRESS: _____

PLEASE READ AND SIGN:

I accept responsibility for all materials borrowed on this card, I understand that there is a charge for lost or damaged materials. Lost or stolen cards must be reported. I agree to abide by the rules of the Santa Ana Public Library.

SIGNATURE: _____
(PARENT/GUARDIAN SIGNATURE REQUIRED FOR CHILD BELOW 9TH GRADE OR UNDER 14 YEARS OF AGE)

PRINT NAME: _____ **DATE:** _____ / _____ / _____

STUDENT INFORMATION (CURRENT STUDENTS ONLY)

NAME OF SCHOOL: _____ GRADE: _____

CITY WHERE SCHOOL IS LOCATED: _____

NOTIFICATION PREFERENCE

Please check **ONE** option.

☐ TEXT MESSAGE SERVICE PROVIDER: _____

Would you like to receive e-mail notifications for Library Programs and Information?

☐ E-MAIL MESSAGE ☐ MAILED NOTIFICATION

☐ Yes ☐ NO

Identification Requirements to Obtain or Renew a Library Card

A photo I.D with current residential address must be provided at times of registration.

Forms of acceptable I.D are:

Valid California Driver's License
Valid California I.D Card
Consulate Identification
Passport
Employee I.D. Card
Student I.D
Active Military I.D.

If current address is not on photo I.D provided, proof of current residency will be required. Acceptable forms of current residential address include:

An envelope mailed to applicant during the last six (6) months. Current rent receipts, car insurance, printed checks, utility bill, credit card statement, bank statement, or automobile registration.

PLEASE NOTE:

Patron must be present to obtain or renew a library card.
Parent or legal guardian's signature is required on registration form for applicants in or under 8th grade level in school. Parent or legal guardian must sign in the presence of a library staff member.

STAFF USE ONLY

INITIALS _____ INPUT BY _____ CT _____ PZ _____

OLD PZ # IF APPLICABLE _____

CHECK ONE (✓): JUV _____ YA _____ ADT _____ SPT _____ E-RESOURCE/COMPUTER USE _____