

Johnston Public Library Registration

210 W. 10th Baxter Springs, KS 66713

Card # _____ Date applied: _____

Name _____

Address _____

Rent or own? Landlord's name and phone #:

Home phone#: _____ Work/cell#: _____

Email: _____

Would you like to receive library news (programs/events/new books & DVDS) by email? _____

Family members who may use this card: _____

Personal reference: (friend, relative, etc. who doesn't live with you)

Address _____

Home phone _____ Work/cell _____

I apply for the right to use the library and promise to obey all rules, to take good care of all library materials I borrow, to pay all fines or damages charged to me, and to give prompt notice of change in my address and/or phone number. I understand that if I do not comply with the above requirements I will lose my library privileges.

Signature of person responsible _____

***This application will be discarded if not completed within one week.**

Reference called on: _____

Two forms of id shown: _____

Out of town fee paid: _____