Scio Public Library

Library Membership Application				
Resident (free) Non-Resident (\$40)	Non-Resident Yo	uth (Free)	6-mo Non-Resid (\$25)	
APPLICANT INFORMATION (Current photo ID and proof of Address required)				
Name:		Phone:		
Physical Address:		Date of Birth	:	
Mailing Address:			Driver's License:	
	Email:			
Additional Family Members (maximum of 6 cards per household) Anyone 18 years of age and older must show current photo ID and proof of address				
Name:	Date of Birth:	Dri	ver's License:	
Email (if different than applicant):	_			
Name:			ver's License:	
Email (if different than applicant): Name:		Dri	ver's License:	
Email (if different than applicant):				
Name:	Date of Birth:	Dri	ver's License:	
Email (if different than applicant):				
Name:	Date of Birth:	Dri	ver's License:	
Email (if different than applicant):				
By signing this application, I acknowledge and agree to pay all fines and fees that may be charged to library cards listed on this form. I understand that this membership is valid for one year from the date of issue. Applicant's Signature: Date: (parent or guardian if applicant is under 18)				
Staff Use Only:				
Name:	Library Card			
Name:	Library Card #:			
Name:	Library Card #:			
Name:	Library Card #: Library Card #:			
Name:	Library Card #:			
Processed By: Amount Co		Date:		