



## Parent / Guardian Library Card Authorization Form

I authorize my minor, 17 years or younger to have a library card with full privileges, including checkout of up to 50 items and full access to digital and internet use.

I accept responsibility for all items checked out on this card.

I agree to promptly pay all fees for materials that are lost or returned late or damaged.

I agree to follow all library rules and policies.

I will notify the library of any changes to my contact information.

I will notify the library if the card is lost or stolen.

I understand that I will need to have the minor or their library card to access their account.

Complete legal name of minor \_\_\_\_\_

Minor's date of birth \_\_\_\_\_

Parent /guardian legal name \_\_\_\_\_

Parent /guardian signature \_\_\_\_\_

Date \_\_\_\_\_

Parent /guardian contact information if different from minor

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