



The educator's library card is **for educators within Fort Vancouver Regional Library District**. Use this card to check out material for classroom use or curriculum support, with an extended loan and renewal period of 6 weeks and a maximum of 100 checkouts at a time. Ask us about other services and resources for educators.

School: \_\_\_\_\_

Staff position: \_\_\_\_\_ Grade level: \_\_\_\_\_

Name: \_\_\_\_\_  
(first) (middle) (last)

Work phone (Include area code): \_\_\_\_\_

Email address: \_\_\_\_\_

Birthdate: \_\_\_\_\_  
month day year

Do you live in an incorporated city?  Yes  No

County:  Clark  Skamania  Klickitat  Cowlitz  Other: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
(number and street or PO box) (apartment #)

\_\_\_\_\_  
(city) (state) (zip)

Residence (if different): \_\_\_\_\_  
(number and street) (apartment #)

\_\_\_\_\_  
(city) (state) (zip)

Your library account requires a PIN. Your default PIN is the last four digits of your phone number.

Optional: Choose a different four-digit PIN

*I certify that: I am authorized to represent the School named above. I understand that I am personally responsible for materials charged to this record. I will responsibly maintain my educator's library account along with any personal library account that I may hold. I understand that borrowing privileges depend upon compliance with the policies of the Trustees of the Fort Vancouver Regional Library District.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

**STAFF USE ONLY**  Checked for personal library account in good standing / blocks  Verified ID/School ID

Barcode \_\_\_\_\_ Staff initials \_\_\_\_\_ Date entered \_\_\_\_\_

• Return completed application to Circulation Services at Operations Center.