

# Library Card Application

For Staff Use:

Library Card #  
\_\_\_\_\_

Name: \_\_\_\_\_

Local Address/P.O. Box: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

4 or 5 digit passcode: \_\_\_\_\_

## Local resident of (circle one):

Cañon, Gilman, , Jemez Pueblo, La Cueva, Ponderosa, San Ysidro,  
Seven Springs/Thompson Ridge, Sierra Los Pinos,  
Village of Jemez Springs (inside village limits), Jemez Springs (outside Village )

## How do you want to receive notifications about renewals, late items, reserved items etc.?

☐ Phone call (automated) ☐ Email

## Do you want to receive library news letter via email?

☐ Yes ☐ No

## Select any other email lists you would like to sign up for:

☐ Homeschool group ☐ Book Club ☐ Other: (please ask about other groups available)

## Library Card Type:

☐ Full/Adult ☐ Teen, self registered (13-17) ☐ Vacation Home (see reverse)  
☐ Child/under 17 with parent (see reverse) ☐ Limited/3 Month (See reverse)  
☐ Educator

By signing this form, I accept responsibility for all materials checked out on this card. I certify that all information given is accurate and true to the best of my knowledge. I agree to abide by the rules and policies of the Jemez Springs Public Library.

**Please review policies at:** <https://jsplibrary.org/policies/> or scan the QR code:

Signature \_\_\_\_\_

Date \_\_\_\_\_



## Parent of child under 17 applicant, please fill out this section

Parent or Guardian Name: \_\_\_\_\_

- ☐ Yes we share the same address      ☐ I have a different address than my child  
(See section below)

### Do you want your child to have internet access with their library card?

- ☐ **Yes** allow internet access via library computers
- ☐ **NO**, do not allow computer access to child. I understand that by checking NO, this limits access to library computers. I understand that if my child comes to the library with a Wi-Fi enabled device the library Wi-Fi will be available for their use, guided by the Internet Access Policy.

Please review policies at:

<https://jsplibrary.org/policies/> or scan the QR Code



Parent/guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent or Guardian signature indicates responsibility for all materials checked out with this library card. I understand my child has the same library rights as any person as per the Library Card & Borrowing Policy and Library Bill of Rights.

## Address of: Parent of child under 17, Vacation Home, Limited access

Permanent Address/P.O. Box: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_