

Bennington Public Library Card Application

Bennington Public Library serves, at no charge, all residents and property owners of Douglas County and all students attending and persons employed by any Bennington school (public or private). All applicants who wish full services must provide photo identification with current street address verification. A parent may show identification and address verification for a minor.

Non Douglas County families may purchase an annual (12-month) non-resident membership for \$30, which entitles each member of the household to library privileges for a 12-month period.

Check one:

- City of Bennington (within Bennington proper/city limits)*
- Unincorporated Douglas County (Bennington/Omaha zip code, but outside Bennington or Omaha proper/city limits)*
- City of Omaha*
- Washington County*
- Other*

Last Name: _____ First Name: _____ Middle Initial(s): _____

Date of Birth (MM/DD/YYYY): _____

Address _____ City _____ State _____ Zip Code _____

E-mail _____ Phone #(s) _____

Persons in same household to be added to application:

<u>Name (first & last)</u>	<u>Date of Birth</u>	<u>Relationship to applicant</u>	<u>Phone</u>	<u>Email</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

- I understand I am responsible for returning all Bennington Public Library materials borrowed on my Library card on time and in good condition to avoid fees.
- I agree to pay the applicable fees if materials are damaged or lost (*not returned within 3 weeks of due date*).
- I understand it is my responsibility to contact Bennington Public Library immediately if my Library card is lost or stolen to prevent unauthorized use.
- I understand it is my responsibility to give immediate notice of changes in address, telephone numbers or email.
- I understand the Library will attempt to contact me by email regarding items being held for me or overdue items, but such notification is a courtesy and is not guaranteed.

Signature of applicant _____ Date _____

Signature of parent/guardian (if under 19) _____

Please print name of parent/guardian _____