

Parent/Guardian Signature

Library Card Agreement: In applying for the right to use the Billerica Public Library, I agree to comply with all its rules and regulations and to give immediate notice of any address change. I agree to accept responsibility for use of all items checked out on my card, including any damages incurred.

Billerica Public Library Patron Registration

Full Name	Pronouns
Street	City, State, Zip
Telephone (best # to reach you)	Cell # (to receive text notifications)
•	ve the library's e-newsletter and Wowbrary newsletter ve the Young Adult e-newsletter
Hold, Overdue, and Billing Notifications	
How would you like to receive notification for hole	ds? Text E-mail Phone
How would you like to receive overdue notices?	Text E-mail Mail
How would you like to receive billing notices?	Text E-mail Mail
Cardholder's Signature	
complete this form if you wish to grant permission	hat circulation records of library materials are private. Please in to another person to pick up your holds. A note will be placed on ransactions. Please note that any person in possession of your library in your behalf.
I authorize the following person(s) to pick up library materials on my behalf:	
Name	Name
For Patrons Under the Age of 14	
Parents and guardians are responsible for monito	aterials in the library, including materials in the adult collection. ring their child's selection of library materials. The above privacy law d your name to the authorization list above if you would like to pick up

Date