

## LTBB Cultural Library Registration/Circulation Form

Patron Name			
Affiliation <i>(please circle one)</i>	LTBB Citizen	LTBB Employee	Educator      Student
	Community Member	Native American	Other: _____
Patron's Address			
City		State & Zip	
Phone Number		Email	
<p><b>I agree to be responsible for all library items and return them by the DUE DATE.</b></p> <p>Patron Signature: _____</p>			
<p>Parent/Guardian Signature (if applicant is under 18): _____</p>			
<p>Address and Phone Number (if different from child): _____</p>			
<p><b>Agreement – I agree to be responsible for the Library materials checked out on the card of the minor child listed above.</b></p> <p><b>I give consent for this child's Library records to be released to me if items are overdue.</b></p> <p>Signature: _____</p> <p>Date Signed: _____</p> <p>Relationship to child: _____</p>			