

Ward: _____

Welcome to Milton Public Library Registration Form

SEE OVER

Name:						
	Last		First		Middle Initial	
Street Addre	ess:					
Town:			_ Postal Cod	le:		
Telephone:						
E-MAIL CON	ISENT					
					and overdues)* holds and overdues by telephon	e.
		MPL's eNews			out new programs, resources	, and
Email Addre	ess:					
Birthdate:						
	Mont	h / Day / Year				
Parent/ Lega	al Guardian N	lame (for child	ren 13 and un	der):		
Age Group:	0-4 years	5-12 years	13-18 years	19-64 years	65+ years	
Languages I	Read in the F	lome (other tha	an English):			
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	Staff Use					1 \

AGREEMENT

The privilege of membership may be withdrawn from any person who wilfully or negligently contravenes the rules of Milton Public Library or who damages library materials or property or who refuses to return or pay for lost or damaged materials borrowed on his/her card.

For Parents/Guardians:

As the parent/quardian of the applicant. I hereby apply for a library card on his/her behalf. I am aware that e

children have access to all materials, including adult materials. I also understand that I am responsible for the monitoring of the applicant's choice of library materials and use of the Milton Public Library's Internet service.					
I have read the information on this form and agree to abide Board. I accept responsibility for all materials borrowed on m or any change in address immediately.	-				
Signature of Applicant	Date				
The personal information you provide is collected under the author P 44, and the Municipal Freedom of Information and Protection used for the proper administration of the library and the provision Public Library.	of Privacy Act. This information will only be				
Questions related to the collection of this personal information show Milton Public Library, 1010 Main Street East, Milton, L9T 6H7.	uld be directed to the Deputy Chief Librarian,				

Staff Use
Barcode:
Staff Initial:

Updated: November 11, 2015