



Please complete the application below and present identification that includes your current home address.

Customers under age 18, without proper identification, may be issued a card with a parent's or guardian's identification and parent's or guardian's signature.

Library cards are free to all residents of Duval County. Library cards are also free to Duval County property owners who live outside of our service area, upon presentation of current property tax receipt. Teachers who are employed by the Duval County School Board, but who do not live in Duval County may also receive a free library card upon presentation of a Duval County School Board teacher ID. Students attending colleges and universities in Duval County may receive a free library card upon presentation of a valid student ID. Employees of the City of Jacksonville or any of its municipal or independent agencies may receive a free library card upon presentation of an employee photo ID card. Military personnel and their families residing in Florida may receive free library cards upon presentation of a military ID.

Florida residents who do not live in the library's service area and do not otherwise qualify for a free card may be issued a library card for an annual fee. If you have any questions, please visit any of the Jacksonville Public Library locations or call 630-2665.

APPLICATION FOR A LIBRARY BORROWER'S CARD

PLEASE PRINT ALL INFORMATION CLEARLY:

Last Name	First Name	Middle Name	Suffix (JR, SR, etc.)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Birthdate YYYY MM DD (for example, 19500829 for August 29, 1950)

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Street Address (include Apt. or Lot # if applicable)

<input type="text"/>

City	State	Zip + 4	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Phone Number			County (user cat1)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PO BOX (if mailing address)	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please give us your e-mail address. It will be used only for library notices and announcements. E-mail is the best and quickest way to receive overdue and holds notification.

E-MAIL ADDRESS _____

For juveniles using parent/guardian ID:

Parent/Guardian First Name	Parent/Guardian Last Name
<input type="text"/>	<input type="text"/>

FOR CHILD'S APPLICATION ONLY:

- I do not want my child to check out R-rated videos. I certify that my child is under age 17.
 I understand my child will be able to check out PG videos, PG-13 videos, non-rated videos, and any other library materials.

No information in your confidential Library records will be disclosed to a third party except in accordance with proper judicial order.

We cannot disclose your confidential Library records to you over the phone without proper identification.

I agree to give immediate notice of change of address, loss of card, and loss of library materials. I will be responsible for all fines or other charges imposed for late return, loss, damage or mutilation of material borrowed on my card. If my card is lost or stolen, I am still responsible for all materials charged to my card until I report such loss to the library staff.

Library Use Below This Line _____ Borrower's Signature (Parent/Guardian Signature)

IDENTIFICATION

1. _____ Library Card Number _____ Profile _____
2. _____ Processed By _____ Date _____