

Round Top Family Library

Application for Child's Library Card

Office Use Only
Entered by _____
Date _____
Barcode _____

NAME OF CHILD _____

CHILD'S DATE OF BIRTH _____

PARENT/GUARDIAN NAME _____

PRIMARY ADDRESS _____

MAILING/LOCAL ADDRESS _____
IF DIFFERENT FROM PRIMARY ADDRESS

TELEPHONE: HOME _____ CELL _____

PARENT'S EMAIL ADDRESS: _____

PARENTS/GUARDIANS

Your initials in the boxes indicates that you understand that the signature below is legally binding and that you have read and agreed to the terms and conditions of the Round Top Library Association's Code of Conduct Policy, its Internet Access Policy, and its On-Site Enrichment Program Policy and understand their significance, and take full financial and legal responsibility for your minor child regarding their use of the Round Top Family Library's facilities and equipment.

Checkout Authorization – I authorize the child named above to check out books, VHS, and/or DVDs from the Round Top Family Library. I understand that the library is not responsible for monitoring any materials checked out.

Internet Use- I authorize the child named above to access the Internet at the Round Top Family Library. I understand that parents and/or guardians, not the Round Top Family Library staff, is responsible for the Internet information selected and/or accessed by their children.

Supervision – I understand that parents/guardians are fully responsible for the well-being, health, behavior, and safety of their children while at the Round Top Family Library. The library staff is not equipped or capable of supervising children. Parents must determine whether or not the conditions at the library are safe and appropriate to the developmental level and abilities of their child. Failure to comply with RTFL Code of Conduct may result in any adult or child losing library privileges and/or expulsion from the library.

Media – I give my permission for the Round Top Family Library to use photographs or videotapes of my child, taken at a RTFL function/activity, solely for the purpose of promoting the Library and its services/programs. I understand that no compensation of any kind will be paid to me or my child.

Signature of Parent/Guardian: _____ Date: _____

Round Top Family Library

Application for Adult Library Card

Office Use Only
Entered by _____
Date _____
Barcode _____

NAME _____

PRIMARY ADDRESS _____

MAILING/LOCAL ADDRESS _____
IF DIFFERENT FROM PRIMARY ADDRESS

TELEPHONE: HOME _____ CELL _____

EMAIL ADDRESS: _____

DATE OF BIRTH: _____

IS YOUR LOCAL RESIDENCE YOUR PRIMARY RESIDENCE? YES NO

CONDUCT POLICY AND REGISTRATION FOR INTERNET USE

The signature below is legally binding and indicates that the party who signed has read and agrees to the terms and conditions of the Round Top Family Library Association's Code of Conduct and Internet Access Policies, published on the library's web page, and understands its significance.

I will abide by all the rules and regulations of the Round Top Library's Code of Conduct and Acceptable Internet Access Policies. I understand that failure to follow these rules will result, minimally, in being barred from future use of any library computer or on-line equipment, expulsion from the library, and/or loss of all library privileges. Serious damage to equipment or software may also result in formal litigation.

SIGNATURE: _____ DATE: _____

I give my permission for the Round Top Family Library to use photographs or videotape of me, taken at a RTFL function, for the purpose of promoting the Library and its services/programs. I understand that no compensation of any kind will be paid to me.

SIGNATURE: _____ DATE: _____