



Chicopee Public Library
 449 Front Street
 Chicopee, MA 01013
 413-594-1800

1. Print out this form (ages 5-12 years)
2. Bring the completed application, with photo ID and proof of current address, to any branch of the Chicopee Public Library. Both child and parent or legal guardian must be present to apply.

CHILD'S LIBRARY CARD APPLICATION

PLEASE PRINT

Child's Last Name: _____ First: _____ Middle Initial: _____

Parent/Legal Guardian Name: _____

Parent/Guardian Mailing Address: _____ Apt #: _____

City / State: _____ ZIP: _____

Child's Address (If different from above): _____

Primary Phone #: () _ _ _ - _ _ _ _ Secondary Phone #: () _ _ _ - _ _ _ _

Email Address for notifications: _____ @ _____

(You'll get an email when holds are in and an email reminder 2 days before items are due)

Text notifications: Cell #: () _ _ _ - _ _ _ _ Cell Carrier: _____

(You'll get a text when holds are in—Normal text rates apply)

Chicopee Public (middle and high) School ID # for OneCard access: _____

Child's date of birth _____ / _____ / _____ (mm/dd/yyyy)

PLEASE READ BEFORE SIGNING:

- I verify that this information is correct and I assume financial responsibility for materials borrowed or for charges incurred on the library card issued with this application.
- I agree to comply with the rules of the Chicopee Public Library and CWMARS member libraries. I understand that this card is not transferable and may not be used by another person.

 Parent/Legal Guardian Name—PLEASE PRINT

 Parent/Legal Guardian Signature Date

STAFF USE ONLY:

Date: _____ Staff Initials: _____ Barcode: _____

Form of ID: License Postcard _____ Other _____
Date Mailed

Replacement Card