

Springfield Library

Glimmerglass Opera Short-Term Library Card Application (in effect June, July, and August)

Please write in BLOCK print!

Personal Information

First Name:

MI

Last Name:

E-Mail:

Phone:

Date of Birth:

Local Address

Street Address/P.O. Box:

Apartment/Suite:

City:

State (2-Letter Abbreviation):

Postal Code:

Home Address

Street Address/P.O. Box:

Apartment/Suite:

City:

State (2-Letter Abbreviation):

Postal Code:

I agree to observe the *Library Card Terms & Conditions* detailed on the back of this application, as well as all library rules and policies. I will notify the library if my card is lost or if I change my name or address.

Please: We're a little library & request that you return all borrowed materials before leaving the area.

Signature:

Date:

=====Library Staff Use Only=====

Application Verified By (Initials):

Date: