



**DAVENPORT  
PUBLIC LIBRARY  
CARD APPLICATION**

The Davenport Public Library Is An Independent City Library, Not A Part Of Library System. It Is Supported By The Taxpayers Of The City Of Davenport, Washington. Use By Non-Residents Is Extended As A Courtesy By The Davenport Public Library Board Of Trustees And Davenport City Council For A Designated Fee.

**PLEASE PRINT.**

BIRTH DATE (IF UNDER 18): \_\_\_\_\_

GENDER: M  F

LAST NAME: \_\_\_\_\_

FIRST: \_\_\_\_\_ MIDDLE: \_\_\_\_\_

PHYSICAL ADDRESS:

\_\_\_\_\_  
Number/Street City/Town State Zip

MAILING ADDRESS (IF DIFFERENT FROM ABOVE.):

\_\_\_\_\_  
Number/Street /PO BOX City/Town State Zip

RESIDENT (Within City of Davenport Limits)  NON-RESIDENT (Outside of City of Davenport Limits)

PRIMARY TELEPHONE NUMBER: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Your pin will be the **last 6 digits** of your library card number. If you want this changed, please let the librarian know.

**PARENT OR LEGAL GUARDIAN (IF UNDER 18.)**

I give the above-named child, under the age of 18 permission, to have a Davenport Public Library card. I will be responsible for all items borrowed on this card, and for all fines and fees, if any should accrue. I understand that my child will have access to materials depending on the kind of card I choose. I would like my minor child to have the following type of card (check one box only.):

FULL ACCESS CARD (WITH ACCESS TO ALL MATERIALS IN THE LIBRARY AND INTERNET)

JUVENILE V-CARD (WITHOUT ACCESS TO DVDS ALL RATINGS.)

INTERNET

JUVENILE R-CARD (WITHOUT ACCESS TO R-RATED DVDS)

INTERNET

PARENT/GUARDIAN NAME (PLEASE PRINT): \_\_\_\_\_

LIBRARY CARD #: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

**I PROMISE TO ABIDE BY ALL LIBRARY POLICIES WHEN BORROWING MATERIALS AND UTILIZING THE DAVENPORT PUBLIC LIBRARY. CARD HOLDER SIGNATURE:**

\_\_\_\_\_

**LIBRARY USE ONLY:**

DATE: \_\_\_\_\_

ID: \_\_\_\_\_

BARCODE #: \_\_\_\_\_

ID VERIFIED

NON-RESIDENT