

Agenda Item 6  
Review of Youth & Adult Library Card Applications  
&  
Authorization Forms



# Youth Library Card Application

(Excerpt)

## Youth (Birth-17) Library Card Application—Requires parent/guardian approval

I, parent/guardian, of applicant am responsible for the use and monitoring of the youth's card. INCLUDING the youth's selection of materials, all fines or fees, and use of electronic resources, including the Internet. Youth library card accounts can be accessed on our catalog at [www.ecctexas.com/library](http://www.ecctexas.com/library) and must be renewed annually with a new application. Proof of address and photo ID for Parent/Guardian ID must also be provided for youth and may be one of but not limited to the following: school ID, report card, birth certificate. Prompt notice of change of address or loss of library card must be given.

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

\_\_\_\_\_ I have been provided the welcome information regarding the Youth Library Card.

### Youth Information - Please Print Clearly

Last Name: \_\_\_\_\_  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: (cell) \_\_\_\_\_ Email: \_\_\_\_\_  
Parent/Guardian Full Name: \_\_\_\_\_



Policy 200.03

# Library Card Applications & Authorization Forms

## Adult (18 and Up) Library Card Application

Proof of address and photo ID is required.

I am responsible for all materials, fines, and fees. Should I allow a minor to use this card, an authorization form must be on file, and I will be responsible for the content of the material they check out. I understand and placed in my library account. My account(s) can be accessed at [www.cctexas.com/hi](http://www.cctexas.com/hi) with a new application. Prompt notice of change of address or loss of library card must

SIGNATURE: \_\_\_\_\_ DA \_\_\_\_\_

\_\_\_\_\_ I have been provided the welcome information regarding the Library Card.

Please Print Clearly

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State: \_\_\_\_\_

Phone: (cell) \_\_\_\_\_

Email: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Middle Name: \_\_\_\_\_



## Policy 200.03

(Excerpts)

Staff Processing Form: \_\_\_\_\_  
Library Submitting Form: \_\_\_\_\_

### AUTHORIZATION FOR CHECKING OUT MATERIALS (Policy 200.22)

TO: Corpus Christi Public Libraries Administration

I, \_\_\_\_\_

Print Name

\_\_\_\_\_ Library Card Number

Address

\_\_\_\_\_ Phone Number

am authorizing the individual(s) listed below to pick up, return and check out library material on my behalf. I take full responsibility for overdue, lost, or damaged fees and content of materials checked out. I am aware that I may check the status of my library account online at [www.cctexas.com/library](http://www.cctexas.com/library) or over the phone. I am aware that I will need to renew my application one (1) year from the date of approval.

Name

Address

\_\_\_\_\_ TX Driver's License or ID