



# Roanoke Valley LIBRARIES

**For Staff Use Only:**

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

Photo ID    Proof of Address    Parent Signature

**REMINDER:** TEMP cards can be issued to teens if 2 of these 3 documents are provided.

Name:

\_\_\_\_\_

First

Middle

Preferred Name

Last

Suffix

Address:

\_\_\_\_\_

P.O. Box and/or Street

\_\_\_\_\_

City

State

Zip

Phone:

[   ]- \_\_\_\_\_

Primary Number

[   ]- \_\_\_\_\_

Secondary Number

Permanent Address or Address ***If Different from Above:***

Address:

\_\_\_\_\_

P.O. Box and/or Street

\_\_\_\_\_

City

State

Zip

Email (for holds and Overdue notices): \_\_\_\_\_

*According to Virginia law, your email address can be given out upon request. All other information is private. However, you can keep your email private. \_\_\_\_ YES, Keep my email private.*

Age [Check One]:    Birth to 4 (Young Child)    5 to 11 (Child)    12 to 17 (Young Adult)    18+ (Adult)

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

Resident of:    Botetourt County    City of Roanoke    Roanoke County    City of Salem  
 Other \_\_\_\_\_

Which library do you consider to be your home library? [circle one]

Bent Mountain	Fincastle	Law	Salem
Blue Ridge	Gainsboro	Main	South County
Botetourt Bookmobile	Glenvar	Melrose	Vinton
Buchanan	Hollins	Mount Pleasant	Williamson Road
Eagle Rock	Jackson Park	Raleigh Court	

*I accept responsibility for all materials borrowed on this card and agree to abide by the policies of the Roanoke Valley Libraries. These policies include paying for lost or damaged items, all overdue fines and giving immediate notice of card loss or change of address.*

Signature of Applicant: \_\_\_\_\_

Printed Name of Parent/Guardian: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_