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Bucks County Public Library Registration

If completing in the library, please print clearly and return the form to the library service desk.

If completing online, enter information, print and bring the form to the library service desk.

STAFF USE ONLY

User Barcode No. _____

UserCat1 (geographic code) _____

Profile Name _____

Last Name _____ First Name _____ M.I. _____

PA Driver's License No. _____ PIN (four digits) _____

Male ___ Female ___ Birthdate (MM/DD/YY) _____ / _____ / _____

Mailing Address _____ P.O. Box/Apt. No. _____

City _____ State _____ Zip _____ Twp./Borough _____ County _____

Street Address _____ P.O. Box/Apt. No. _____
[if different from above]

City _____ State _____ Zip _____ Twp./Borough _____ County _____

Primary Phone _____ Alternate Phone _____

E-Mail _____

PARENT/GUARDIAN (Required if registrant is under 16)

Last Name _____ First Name _____

I agree to:

- Observe all policies and procedures for use of all materials, including electronic tools and resources, established by the Bucks County Public Libraries.
- Be responsible for all materials borrowed on my card and/or my child's card
- Pay any fees or charges imposed
- Promptly notify the library of any changes of address, name or loss of card
- Supervise and guide my child in the use of the internet and all other library services and materials

Signature _____ Date _____

Signature of Registrant (or Parent/Guardian if registrant is under 16)