

Appendix C
CASCADE PUBLIC LIBRARY
GROUP APPLICATION FORM

Patron No.: _____ Fee Paid: _____ (Nonresident: \$45)
Sign up date: _____ Enrolled by: _____

Identification and address verification provided:

Type: _____

Witness: _____



We do not issue accounts to minors (under 18) unless the parent or legal guardian is present and has an account.

Group Name _____

(Group Leader) Last name _____ First Name _____

(Group Headquarters) Street Address _____

Mailing Address _____

Phone _____ Email _____

Only the group leader can checkout items. Otherwise, a written permission from the group leader is required.

Please initial and sign below.

___ I acknowledge that the Cascade Public Library will not deny or limit access information available via electronic resources. I acknowledge that parents must be responsible for providing guidance to their own children; it is not the role of library staff or volunteers. Unsupervised children who use the internet or check out library materials may be exposed to inappropriate or disturbing information and images. Parents are responsible to discuss the use of the internet with their children in relation to family values and boundaries and monitor their children's use.

___ I agree to be the sole holder of this group membership and to provide a written letter for the group's library use and checkouts if and when I am absent.

___ I agree to be responsible for all items borrowed with the library account issued in the above name, including items borrowed with the library account by others in the group with or without my consent. I promise to comply with all library rules and policies both present and future, and to give prompt notice of change of address or unauthorized use of my library account.

Group Leader Signature _____ Date _____