

## Livingston County Library - Childrens Application

Please Print

Last Name:

First Name & M.I:

Parent/Guardian name:

Street Address

City

Zip:

Mailing Address: (if different)

County of Residence:

Home Phone:

Child's Birth Date:

Internet resources accessible through the Library are provided equally to all library users. Patrons under 18 must complete a consent form, signed by a parent or guardian, to use a computer. Parents or guardians, not the Library or its staff, are responsible for the information selected and/or accessed by their children. Parents are advised to supervise their children's Internet sessions.

Internet computers are located in an area that does not allow for privacy. Users are reminded that anyone nearby can view the monitors and are encouraged to consider the community's standards when using the computers.

Patrons are not allowed to view or print material that is pornographic for minors as defined in section 573.010.

RSMo

Patrons agree to comply with the Acceptable Use Policy for Computer Equipment, Internet and Network Access and the Security Policy (a copy will be provided upon request) of Livingston County Library and to comply with local, state and federal laws governing the use of electronic systems. Patrons are solely responsible for violations they or their legal dependents commit. Acts contrary to library policies or local, state or federal laws may result in suspension of library privileges and consultation with appropriate legal authority.

I agree to comply with the Acceptable Use Policy for Computer Equipment, Internet and Network Access and the Security Policy of Livingston County Library. I understand that if my child fails to comply with policies, the Library may contact me about his/her behavior and may suspend his/her library privileges.

Yes

No

I agree to comply with the Acceptable Use Policy for Computer Equipment, Internet and Network Access and the Security Policy of Livingston County Library. I understand that if I fail to comply with the policies, the Library will contact my parent or guardian and I may lose my internet or library privileges.

**Child's Signature: X** \_\_\_\_\_

I agree to be responsible for all material checked out by this child and will pay any fees for damaged or lost materials. I agree to follow the policies of Livingston County Library and understand that it is the policy of the library to allow patrons all access to any materials. I attest that the information in this application is correct

**Signature Of Parent or Legal Guardian: X** \_\_\_\_\_

The Library card is the property of the Livingston County Library and must be surrendered on request

### STAFF USE ONLY

A. Card Type:

New

Replacement...Patron Record # \_\_\_\_\_

B. Patron Type:

1-Resident

2-Non-Resident; expires: \_\_\_\_\_

3-Non-Resident; Liv. County's Taxes Pd. \_\_\_\_\_ expires \_\_\_\_\_

C. Bar Code Label:

D. Date Issued: