



CEDAR PARK
PUBLIC LIBRARY

Library Card Application

Cedar Park Library Card#:

Last Name _____ First Name _____

Last 4 digits of Social Security # _____ Birthdate _____
Month Day Year

Address _____

City _____ State _____ Zip _____ Subdivision _____

Phone _____ Alternate Phone _____

Mailing Address _____
(If different from address above)

Identification Number _____ State/Country _____
 Driver's License State ID Consular card Passport Other _____

Email Address _____

*Item due reminders *automatic renewal notification *account about to expire *customize your own notification settings



Do you need a voter registration form? Yes No

Opt-Out of Friends/Foundation marketing emails:

I do not want to be contacted by the CPPL Foundation or the Friends of the Library.



We never share your email address.

Additional library cards for dependents under 18:

Name	Birthdate	Rated R Movies?
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

By using this card (or authorizing its use by another person), I accept responsibility for:

- materials borrowed from the Cedar Park Public Library or other TexShare libraries;
- materials borrowed by minors in my care;
- library cards I obtain for minor children for whom I am a guardian;
- for penalties incurred for lost, damaged or unreturned Library material;
- for appropriate use of copyrighted material (Title 17, U.S. Code);
- and for charges assessed for special services.

As per City of Cedar Park Ordinance 1.09.



Signature _____ Date _____

Staff Use Only

Staff Initials _____

Proofread _____

Card Type

Resident CP Employee

Out of District Paid:

3 6 12month

TexShare

Home Lib _____

TexShare # _____

Txsh expiration _____