



# Library Registration Form Ages 13-18

Please fill out and return to the desk with one piece of I.D. showing your name and current mailing address. (Please print clearly)

FIRST name:	MIDDLE Name:	LAST Name:	Date of Birth			
			Day	Month	Year	Male <input type="checkbox"/>
						Female <input type="checkbox"/>

Parent/Guardian's name:

Address (Mailing):	Telephone:
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City:	Province:	Postal Code:	E-mail Address:
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Second Address (Mailing):	Second Telephone:
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City:	Province:	Postal Code:	I live in (choose one only): <input type="checkbox"/> Stewiacke (within town limits) <input type="checkbox"/> Truro (within town limits) <input type="checkbox"/> Colchester <input type="checkbox"/> East Hants - Corridor * <input type="checkbox"/> East Hants <input type="checkbox"/> Cumberland <input type="checkbox"/> Halifax (HRM) <input type="checkbox"/> Pictou (Co.) <input type="checkbox"/> West Hants <input type="checkbox"/> Other (Nova Scotia) <input type="checkbox"/> Other (Canada) <input type="checkbox"/> Other (International)
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Mother Tongue: English  French  Other \_\_\_\_\_

To see the library's privacy policy, ask for our pamphlet or check our website at [cehlibrary.ednet.ns.ca](http://cehlibrary.ednet.ns.ca)

\_\_\_\_\_  
 Signature Date

I agree to take responsibility for the materials borrowed on this card and to abide by the rules and regulations of the Public Library. I will contact the library with any changes to the above information.

Staff Use Only

- CEA
- CEJ
- CETBA
- CEVIS
- Other

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Address Verified  
 yes  
 no (mail card)

- New
- Renewal
- Card Replacement
- Update ( ie. address or phone#)

\* For library purposes, "East Hants Corridor" refers to these communities: Belnan, Elmsdale, Enfield, Lantz, Milford, and Nine Mile River

Library Card No. \_\_\_\_\_

Location: \_\_\_\_\_

Initials: \_\_\_\_\_