

Library Card Application

First Name	Middle Name	Last Name_	
Legal Name (if different than above)		Birth Date_	
Phone Number (include area code)		Preferred Language	🗌 English 🗌 Spanish
Address	City	State	Zip
Mailing Address (if different than above	e)		
	City	State	Zip
What county do you live in?	-		
 Pima County Cochise County 	Maricopa CountyPinal County	Santa Cruz County Other County	
What method of notification would yo	u like for reserve and overdue notices?	Choose only	one.
Email	Phone		
Create a PIN. You will use a PIN to access your account online and use the self-checkout. Your Personal Identification Number must be four numbers long. Do not use repeating number, such as 1212 or 2222. Choose a number you will remember easily.			
Parent or Legal Guardian Information for Applicants Under 18 Years of Age			
Full Name of Parent/Legal Guardian			
elationship to Minor Parent/Legal Guardian Birth Date			
Parent/Legal Guardian Signature			
Link my card to my child's, so I am a view their child's library card activity.	ble to view their account. (If this is not i)	ndicated, pare	ents or guardians cannot
My 14-digit library card number 21	152		
By submitting this form, I assume financial responsibility for materials borrowed on this card and agree to follow all rules of the Pima County Public Library System. Please report the loss of this card and change of addresses immediately to the library.			

The responsibility for what a minor borrows rests with the parent or guardian.