

# EVERGREEN LIBRARY CARD APPLICATION

(Photo ID required)

## PLEASE PRINT

Full Name \_\_\_\_\_  
(First) (Middle) (Last)

Birthdate \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Address \_\_\_\_\_

(City)

(State)

(Zip Code)

Telephone# \_\_\_\_\_

1. Items checked out from Evergreen are due at the end of the current Academic quarter.
2. Please notify the library of any changes to address, phone, or email, or update online.

### Please Read and Sign the Statement Below:

I agree to abide by the rules of the libraries from which I borrow materials and to pay any fees that may be charged for materials/equipment lost, damaged or returned late, as stated in the rules. I understand that I am responsible for all use made of my library card, with or without my consent.

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

Date \_\_\_\_\_ Parent's/Guardian's Signature \_\_\_\_\_  
(only if under 18 years of age)



**The Evergreen State College Library**

Staff  
initials:\_\_\_\_

Revised 10/22/19