Library Card Registration Form

Lancaster County residents 5 years of age and older are eligible to apply for a library card.

* Required information						
*Name Last Name	First Name	Middle Initial	Suffix			
*Address:				Apt. ‡	‡	
*City/Town:		, PA	*Zip:			
Alternate Address						
*Primary Phone:		Alternate Phone:				
*City, Borough, or Township:	p:*County					
*Name of primary contact at t	his address for Lib	rary mailings:				
*School District:		E-mail:				
I would like to be informed	l about Library ev	vents/information via email.	YE	S NO		
*Date of Birth: Month:	Day:	_Year:	*Gender:	M	F	
Language(s) spoken at home of	other than English_		Hon	ne-Schoole	r: Yes	No
or telephone number, and to pron right to access all materials and Independent Local Public Librari Code, Act of June 14, 1961, P.L.	nptly pay any fines of I services the Librar ies of Lancaster Cou 324, as amended that	and you promise to abide by all its r damages charged to your card. Alry provides. Some services (i.e.: nty recognize the legal guaranties rough July 1, 1985, Section 428. The tion to secondary sources only if	Il registered car computing) ma of confidential The Library pro	d holders in ay require a ity as specif omises to ke	good standditional Ged by la ep all Lib	anding have eq l signatures. T w in The Librorary transaction
responsible for their overdue fine materials their children or wards	es and lost materials borrow through perso ges and responsibilit	nt's signature. Parents and guardincurred by their usage. Parents a conal interaction with the child. Pleaties to all clients regardless of age	nd guardians an ase note the Lib	re also respo orary respec	onsible for	or monitoring nfidentiality of
I have read the Library Card Use	r Rights and Respons	sibilities and this application in ful	l and agree to c	comply with	the guid	elines presente
*Applicant Signature:			Date			
)				
Library use only:		+++++++++++++++++++++++++++++++++++++++				
Staff Member Initials	Out of C	County: Access Card Verification	on 🗆 Fee			

Date	

Computer User Contract - Valid for up to 3 Years (Expires concurrent with Library card)

Name	
Library Card Number	
Signed at Location	
Address	
Are you 18 years of age or older? YES NO If no, give date of birth	
I have read, understand and agree to comply with the Public Libraries of Lancaster County Policy and Disclaimers. I further understand any infraction of the agreement will result in agree to hold LSLC and its representatives harmless for any and all loss, problem, or dama computers or internet access. Further, I agree to indemnify LSLC for any loss or liability the violation of the Computer Use Policy (stated or unstated) by me.	the loss of my computer privileges. I ge resulting from my use of Library
Signature	Date
Staff Witness	Date
If the user is under the age of 18 a parent or legal guardian must sign below	
By signing below I give permission for my child to use the Library computers and/or access guardian. I understand by signing this contract they may use the computers, under the agree Libraries of Lancaster County Cooperative Internet and Computer Use Policy and Disclaim	ement as stated here and on the Public
Parent/Guardian Signature	Date
Staff Witness	Date
LSLC prohibits "displaying, downloading or copying offensive or inappropriate messages defined in 19 Pa. C.S.A. § 5903."	pictures or explicit sexual material as

I understand that should I violate any portion of the Public Libraries of Lancaster County Cooperative Internet and Computer Use Policy and Disclaimers either explicitly or implicitly I shall lose all computing privileges within LSLC.

copyright infringement lies with the user.

U.S. Copyright Law (Title 17, US Code) prohibits the unauthorized reproduction or distribution of copyrighted materials, except as permitted by the principles of "fair use." Users may not copy or distribute electronic materials (including electronic mail, text images, programs, or data) without the explicit permission of the copyright holder. Responsibility for any consequences of