

DATE:

Lindenwold Library Membership Application

I apply for the right to use the Library, Library computers, & to comply with all Library rules. I take full responsibility for materials borrowed, and will promptly pay any damages or fines imposed. I will give prompt notice of any change in my contact details.

Full Name.....

Address.....Phone.....

City.....State.....Zip.....

E-Mail.....

Signature.....