

Reciprocal Borrower Library Card Registration Form
(Please PRINT; Fill out completely)

Name:
Last: _____ First: _____ Middle: _____

Home Mailing Address:

Street or P.O. Box: _____
City: _____
State: _____ ZIP Code: _____
Telephone #: _____

E-Mail Address: _____

User Status:

Home participating library: _____
Home library card number: _____

Second ID - select 1 (must be picture ID):

Alaska Driver's License #: _____
Alaska State ID #: _____
Other: Type: _____ ID #: _____

I understand that, for purposes of maintaining a current address on file and for collection of overdue items or outstanding charges, my library record may be shared with other libraries in Alaska as part of my participation in the statewide reciprocal borrowing program. I understand that I am responsible for all library materials checked out on this card.

Patron Signature: _____
Date: _____

For Staff Use:	Accepted: _____
Patron ID (Place Barcode Here):	Initials: _____
Patron Type: RAS-RECBRW	Date: _____
#####	Entered: _____
Local Code #: 0100	Initials: _____
Expiration Date (6 months after issued): _____	Date: _____
Remarks: Alaska State Reciprocal Borrower--expires 00/00/00.	Verified: _____
	Initials: _____
	Date: _____