

THE NEWARK PUBLIC LIBRARY Borrower Registration Form

E-mail Address _____

Name _____

Street _____ (Last) (First) (Middle) Apt. # _____

City _____ State _____ Zip Code _____

Home Telephone _____

Name of Parent or Guardian (if under 14) _____

Please indicate if you are:

- _____ A preschool child
- _____ A student in grades 1-7
- _____ A student in grades 8-12
- _____ A college or university student

A resident of another city or town who:

- _____ works in Newark
- _____ goes to school in Newark
- _____ owns property in Newark
- _____ has paid a fee for the Newark Public Library borrower's card
- _____ a member of The Newark Public Library staff