

ENOCH PRATT FREE LIBRARY

TEACHER'S CARD APPLICATION

NAME _____

PERSONAL ADDRESS _____

CITY/STATE/ZIP _____

BIRTHDATE _____

EMAIL _____

MOBILE/CELL NUMBER _____

TEXT ALERTS: If you would like to receive text alerts for pending due dates, requested items ready for pickup, or overdue items indicate below.

OPT-IN

(There is no charge from Enoch Pratt Library for this service, however you may see a charge for incoming text messages at the standard rate applied by your mobile service provider. At any time, you can choose to opt out of this service by updating your account preferences online or contacting any circulation desk.)

SCHOOL NAME _____

SCHOOL ADDRESS _____

SCHOOL CITY/STATE/ ZIP _____

SCHOOL TELEPHONE NUMBER _____

PRINCIPAL/DIRECTOR _____

- I agree to pay the replacement cost for any lost or damaged materials.
- I understand that failure to return materials charged on this card may result in the suspension of my teacher library card and may affect borrowing privileges on my personal library card.

SIGNATURE _____ DATE _____

- LIBRARY USE ONLY -

PERSONAL LIBRARY CARD NUMBER _____

TEACHER LIBRARY CARD NUMBER _____