

Pamunkey Regional Library Library Card Application

Full Name (Please Prin	t):		
City:	County:	State:	Zip:
Driver's License Numb			1
	Birth Date:		
Please complete the fol			
\Box less than 1 year old	\Box 1 to 4 years old	\Box 5 to 11 years old	\square 12 to 14 years old
□ 15 to 17 years old	\square 18 to 44 years old	\Box 45 to 64 years old	\square 65 years or older
The Pamunkey Region	al Library serves Goocl	nland, Hanover, King &	Queen, and King William Counties. If
you reside outside one	of the counties we serv	e, please complete the fo	ollowing:
1. I (please circle one)) work/ attend school/ c	wn property in one of th	e counties PRL serves.
Name of County:			
2. I have a library card	from a public library	in Virginia.	
Name of Library:			
If none of the above ap	plies, the applicant will	owe an annual \$25.00 r	non-resident fee payable at registration.
I apply for the right to	o use the Pamunkey R	egional Library. I agr	ee to comply with the Pamunkey
Regional Library Pat	ron Guidelines for Co	mputer Use and all oth	er Library rules and regulations, and
to give immediate not	ice of any change of m	y address.	
Applicant Signature:			
If you are under the a	ge of 18, the Library	requires your parent's	or guardian's signature. By signing
below, the parent or g	uardian takes respon	sibility for the Library	resources that his/her child uses and
checks out of the Libr	ary.		
Parent/Guardian Signat	ture:		
			••••••
FOR STAFF USE ON	NLY Library Staff Na	me:	
Date Received:	Patron Location	n:Pat	ron Category
Patron Demographic:			