DA	TE:			

FLETCHER FREE LIBRARY CARD APPLICATION- ADULT

Last Name	First Name	Middle Name	Burlington Resident: Yes or No (Circl	e)
Mailing Address	Apt#	Town	State Zip	
Primary Phone	Email			
Alternate Address		Town	State Zip	
Notifications -Check ☐ by email	one: □ by text – Carrier		□ by phone call	
• 0	-	0	her Free Library, to promptly pay all fines ve immediate notice of any change of address.	
Signature:			.Date	
* * * * * * * * * * * * * * * * * * *		******	***********	k
to pick up any items or	n hold for me at the Fletch	er Free Library. These	I authorize the library to allow the patrons listed belo items for loan will be placed on my library card. I orization, which I may do at any time.	W
Person who is giving	authorization:			
(Signature)			FOR LIBRARY USE: Info entered on Koha completed	
Below, print the com	plete names of the auth	orized persons:	Note: Confirm account email notices & Pin # Add to Card Notes:	
(Print Name)			College Student: School	
			Working in BTV: Employer	
(Print Name)			Scanned Attached File	
			Card Type: <i>Temporary Adult</i>	
(Print Name)			Senior Non-Resident	
• .	orize full disclosure of in e listed above: YES or N	-	Out of State: yes no	