PICKENS COUNTY LIBRARY SYSTEM BORROWER REGISTRATION

Please print clearly

LAST NAME:	MAIDEN NAME MIDDLE			
FIRST				
PIN NUMBER A four digit pin number will	allow you to acc	cess your record and	d place requests when using our library online catalog.	
DRIVER'S LICENSE NUM	BER/ ID NUMI	BER of PERSON R	ESPONSIBLE	
DATE OF BIRTH				
TELEPHONE (CELL)		(HOME)	(BUSINESS)	
MAILING ADDRESS				
CITY	STATE	ZIP	COUNTY	
RESIDENCE STREET ADD IF DIFFERENT FROM A	DRESS ABOVE			
CITY	STATE	ZIP	COUNTY	
including books, audiovist PLEASE INITIAL EMAIL NOTIFICATION FOR E-MAIL ADDRESS	if you wan	nt to opt in to having	g access to your circulation history. S? YES NO	
		Oriver's License or S 2. State Photo ID	Action with the following: State Photo ID with current address. or O and proof of current address. rtificate, Social Security Card, School ID	
FOR OFFICE USE ONLY	CIRCLE ID USED ABOVE			
DATE APPLIED			FORM COMPLETEBY STAFF	
□ Y TO AV	□ OUT OF	COUNTY GOOD	STANDING PARENT/GUARDIAN GOOD STANDING	
	□ OUT OF COUNTY NOT IN SYSTEM			
□ NON RESIDENT (fee ch	narged)			

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