

Cleveland Bradley County Public Library

Card Number _____

(Staff Use Only) Processed By _____

The following information is understood to be confidential. It will not be released to any other party and will be used only to conduct library business. Forms are shredded after library use.

Have you ever had a CBCPL library card before? ☐ Yes ☐ No

Name:

[Last]

[First]

[Middle]

Address:

[Street]

[Apt]

[City]

[State]

[Zip]

[County]

Do you live inside the Cleveland City Limits? Please circle Y N Not Sure

Contact:

[Email Address]

[Primary Phone]

[Other Phone]

Would you like to receive Pre overdue and reserve notifications ? ☐ Yes ☐ No

If yes circle: Text or Email -- Phone Provider _____

Info:

[Drivers License Number]

[State]

[D.O.B]

mm

dd

yyyy

Age Group: ☐ Under 14 (Parent Must Sign) ☐ 14-17 ☐ 18-54 ☐ 55+

Name of Parent or Legal Guardian (If Under 18)

Parent or Guardian's Driver's License Number/State

Household:

List the name of all family members in your immediate household who have or have had a library card.

Please circle Title VI question on the back of the form. Thank you

Agreement: I agree to:

- Present my card every time when checking out materials.
- Be responsible for all materials borrowed; pay fines for overdue materials; and pay for the replacement of lost, stolen, or damaged materials.
- Give notice of change of address.
- Report the loss or theft of card.
- Not lend my card or materials to others.
- Parents: Accept responsibility for fines and replacement of lost, stolen, or damaged materials borrowed by a minor child, understanding fines on one household member's card will affect all members of the household and by signing this application parents/legal guardians agree to monitor their minor child's use of library resources and materials.

This is to certify that I hereby apply for the right to use the Cleveland Bradley County Public Library. I have read and understand the above agreement and I will comply with all the library's rules, regulations and policies.

Signature: _____

Date: ____ / ____ / ____

Cleveland Bradley County Public Library
Civil Rights Act of 1964 – Title VI
Data Collection Form

In compliance with **Tennessee Code Annotated it 4-21-901** (Title VI Implementation Plans), the Cleveland Bradley County Public Library is collecting the following demographic information. **This information will be used only for statistical purposes and your participation in this process is completely voluntary. Your name will NOT be attached to the following data.**

Please circle the word that best describes your racial or ethnic category.
(The categories are from the U.S. Census)

White

Black

American Indian, Eskimo, or Aleut

Asian or Pacific Islander

Hispanic Origin (Of Any Race)

Other Race

Not Answered

This is only for statistical purposes. It is not attached to your record in anyway. Thank you for signing up for a library card!