

York County Library Card Application for Youth
(Ages 17 and under)

Please print. Please complete this form and present it and a valid, current proof of identification and residency in person to a branch location of your choice, or the Bookmobile.

Date: _____

Last Name

First Name

Middle Name

Phone

Street Address (include mailing address, if different)

City

State

Zip Code

Email: _____ @ _____

Birthdate (Month/Day/Year)

Welcome to York County Library!

I agree to be responsible for materials borrowed with this card, for all fines incurred, and for loss and damage of materials charged to it. I accept responsibility for the selection of materials made by this person.

Signature of Parent or Legal Guardian

I agree my child may access the Internet and that I am responsible for monitoring this access.

Signature of Parent or Legal Guardian

Please note that children ages 10 and under must be accompanied by an adult 18 years or older while using the Internet.



York County

Library

YOUR COMMUNITY LINK