

Application for Alpine County Library Card
Temporary (Adult & Minor) Form

BLUE CARD

FOR STAFF USE

VCFOF _____ ICFOF _____

Patron ID# 20251-

Bear Valley _____

Markleeville _____ Bookmobile _____

Date _____

Name _____

I am a resident of _____ COUNTY and _____ STATE, and

I am in the _____ Library District (# _____)

Permanent Resident/Mailing Address

Local Residence/Mailing Address

E-mail _____

Resident Phone _____

Local phone _____ Cell Phone _____

Photo ID--Specify Type (Driver's license, Library Card, Military Card, etc.)

ID # _____ Expires _____

DOB _____

I agree to accept full responsibility for all materials borrowed on this account. Likewise, I agree to abide by all Library policies and procedures **and to inform staff of any changes to my contact information.**

Signature _____

Notes:

OVER 

