

MCPL LIBRARY CARD APPLICATION



Full Name : _____

Address : _____

City : _____ State : _____ Zip Code : _____

Phone Number : _____ Email : _____

Age : _____

Circle One: Male or Female

Library Card Type: (please check one)

Adult (18 & Older) Child (17 & Younger)

Parent or Guardian (if child patron) _____

Internet & Computers

Check here if you like to use the computers at MCPL.

By signing below, I agree to pay any damages charged to my library account, obey all rules and regulations of the library, give notice of any change of address or contact information.

_____ Date//

OPAC LOGIN (Library use only)

User Name: _____ Password: _____