

## Application for London Public Library Card - Child (12 years and under)

Child Applicant		
First Name:	Preferred Name:	
Middle Name:		
Last Name:		
Date of Birth (dd/mm/yyyy):	Phone Number:	School: (If applicable):
Apt/Unit#:	Street Address:	
City:	Province:	Postal Code:
Please check boxes that apply: <input type="checkbox"/> Preschool <input type="checkbox"/> Elementary <input type="checkbox"/> Homeschool <input type="checkbox"/> N/A		
Parent or Guardian		
I would like my child to have their own library card. I accept all responsibility for the use of all Library services and collections, including the Internet, by my child.		
First Name:		
Middle Name:		
Last Name:		
Email (optional):		
<input type="checkbox"/> Send me courtesy notices of holds and overdue items by email. <small>In line with CASL (Canadian Anti-Spam Legislation), by providing the library with your email address, you are agreeing to receive email from the library that relates to your account.</small>		
Parent or Guardian Signature:		Date:
For office purposes only   Barcode #		
Personal information collected by London Public Library is done so under the authority of the Freedom of Information and Protection of Privacy Act, 1990 (MFIPPA/Regulations 29.) The information collected will be used in the process of the library's business. Questions regarding the collection of this information should be directed to the CEO & Chief Librarian, London Public Library, 251 Dundas Street, London, ON N6A 6H9.		