

# Application Form Instructions

1. Print out the form.
2. Fill in all the applicable blanks. Be sure to include a STREET mailing address, not a PO box. A street address is required for verification.

**At this point you have 2 choices:**

**EITHER:**

3. Mail the form to:  
Parmly Billings Library  
510 North Broadway  
Billings MT 59101
4. The library will mail your library card to the STREET address you have provided. This serves as your address verification.
5. When you receive the library card in the mail, come in to the library and present the library card and your photo ID at the Circulation desk when you are ready to check out. You will be a permanent borrower eligible to check out up to 50 items at one time.

**OR:**

- 3a. Bring the form in to the library with a photo ID. The library will issue a new borrower's card to you.
- 4a. Fill out the address verification postcard. The library will mail the postcard to the address you provide. You will be limited to checking out 6 items only as a new borrower.
- 5a. When you receive the address verification postcard, bring it in to the library with your library card and photo ID. Your status will change from new borrower to permanent borrower and you will be eligible to check out 50 items at a time.
- 5b. If you do not bring the address verification postcard to the library within 30 days of mailing, your library card will expire and you will be required to do another address verification.



# Parmly Billings Library Application for Library Card

*Photo Identification & Proof of Current Street Address  
Required*

**Please Print**

Full Name \_\_\_\_\_  
Last First Middle

Birthdate \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Parent/Guardian with identification may sign to verify address of a minor.

Telephone \_\_\_\_\_  
Home Work

Mailing Address \_\_\_\_\_  
Number & Street Apartment #

City State ZIP Code

Home/Street Address (if different from mailing address)

Number & Street City State ZIP Code

Male \_\_\_\_\_ Female \_\_\_\_\_

I agree to abide by the policies and regulations of the Parmly Billings Library, and to notify the Library when any information I have given changes. I will be responsible for all charges for any overdue, lost, or damaged library materials checked out on my card. If my card is lost or stolen, I understand that I am responsible for charges on it until the Library is notified of its loss.

\_\_\_\_\_  
(Applicant Signature)

Barcode Number

Date: