

Rangeley Public Library

Patron Registration

Name

Last: _____ First: _____

Name on Identification

Last: _____ First: _____

Primary Mailing Address

P.O. Box or Street Address: _____

City: _____ State: _____ Postal Code: _____

Secondary Mailing Address

P.O. Box or Street

Address: _____

City: _____ State: _____ Postal Code: _____

Phone Contact (Include Area Code)

Phone 1: _____ Phone 2: _____

Email Address: _____

Would you like to receive our monthly enewsletter? _____

Notification Option (Choose ONE)

_____ None _____ Email _____ Postal Mail _____ Phone 1 _____ Phone 2

_____ Text Message (Wireless Carrier for text message: _____)

Exclude from notifications:

_____ Overdue _____ Hold _____ Billing _____ Almost Overdue/Auto Renew

_____ Patron Record Expiration _____ Inactive Patron

Do you want your account to maintain your reading history? _____ Yes _____ No

For under age patrons only -

Parental/Guardian Signature: _____