



NEW PATRON APPLICATION FORM

Full Name:

Last Name First Name MI

Address:

Street Apt. City or Town

State Zip Code

Phone: _____

Check to receive text notifications for holds/overdues.

Email:

Patrons are automatically signed up for our weekly newsletter highlighting library services and events. You can unsubscribe at any time.

**Date
of Birth:**

(mm/dd/yyyy) format
*Note: All library card applicants must
be six years of age or older.*

**Preferred
Pronouns:**

(Optional)

**Hold
Pickup:**

I authorize anyone to pick up my holds.

I only authorize the following to pick up holds:

Signature:

By applying for a library card, you agree to the Topsfield Town Library's borrowing guidelines.

Parent's signature required for applicants under the age of 14.

Check if you wish to enroll in Wowbrary. You will receive a weekly email with the newest additions to our collection.

To apply for a Library Card:

• Bring this form to our Circulation Desk. Present **proof of Topsfield residency** and use your card immediately (not a Topsfield resident? Apply at your home town library).