



Henrico County Public Library

Member Registration Form

Adult registrants are required to provide a valid **government-issued photo identification** and **proof of current residence address** at the time of registration.

I. Registrant Information

Name	_____	_____	_____	_____
	Title	Last	(Jr., Sr., III) First	Middle
<input type="checkbox"/> Adult	<input type="checkbox"/> Juvenile (under 18)	Birth date (mm/dd/yyyy)	_____	Gender _____

II. Adult Information (adult registrant, or parent/legal guardian of juvenile registrant)

Name	_____	_____	_____	_____	
(if not registrant)	Title	Last	(Jr., Sr., III) First	Middle	
Virginia DMV ID	_____				
Residence Address (required)	Mailing Address (if different)				
_____	_____				
Street	Apt.		Street	Apt.	
_____	_____				
City	State	Zip	City	State	Zip
County/City of Residence:	<input type="checkbox"/> Henrico	<input type="checkbox"/> Chesterfield	<input type="checkbox"/> Richmond	<input type="checkbox"/> Other	_____
I would like to receive courtesy overdue notices and hold notices by:					
Email	_____			Phone	_____

III. Optional: Additional Authorized User

I authorize (full name, must be 18 or older) _____ to have access to this Henrico County Public Library account for the purposes of paying fines, checking out library holds, renewing borrowed materials, and verifying what materials are checked out on this account. This authorized user will not have access to my library card number and may not check out additional library materials on this account. I understand that if this user needs to be removed from this account, it is my responsibility to do so by contacting my library.

IV. Signatures

PLEASE READ BEFORE SIGNING: The undersigned adult is responsible for materials borrowed, fines charged, and any damage, whether intentional or unintentional, to library property including public-use computers and any related software or hardware provided by the library.

Registrant signature

Date

Parent/Legal Guardian Signature

LIBRARY USE ONLY	ID#	_____ - _____ - _____	Staff	_____	Reg Checked	_____
<input type="checkbox"/> Gen-Gov	<input type="checkbox"/> Grp Home	<input type="checkbox"/> Juv to Adult	<input type="checkbox"/> New Res	<input type="checkbox"/> Non-Res	<input type="checkbox"/> Recip	<input type="checkbox"/> Temp