

# LEON VALLEY PUBLIC LIBRARY

*Your Hometown Full Service Public Library*

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Driver's License \_\_\_\_\_  
or TX ID#:

Telephone --Home: \_\_\_\_\_ ☐ --Work: \_\_\_\_\_ ☐

--Cell: \_\_\_\_\_ ☐ --Other: \_\_\_\_\_ ☐

--eMail: \_\_\_\_\_ ☐ --Today's Date \_\_\_\_\_

Internet access? Yes ☐ No ☐ (If under 18, parental signature permission form required)

Parental Signature, if card is for Youth under 18 years old:

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Please keep your library card in a safe place, you are responsible for all materials borrowed on the card. If your card is lost please report this to the Library. **WELCOME!**

(for Library Use)

Card #: \_\_\_\_\_

Input: \_\_\_\_\_

Notes:

Please checkmark your preferred form of  
contact (for reserves, etc.)?