

**DCL 2-1a**

**ADULT APPLICATION:**

Date\_\_\_\_\_

Name\_\_\_\_\_

(last) (first) (middle)

Address\_\_\_\_\_

City\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_

Phone number\_\_\_\_\_

(home) (work)

Reference name and phone number\_\_\_\_\_

(Someone who does not live at your address)

Please fill in one of the following numbers:

Drivers license number\_\_\_\_\_Date of Birth\_\_\_\_\_

Signature\_\_\_\_\_

I apply for the right to use the Dunklin County Library and will abide by its rules. I will pay fines or damages charged to me and give prompt notice of any change of address and phone number