



Ontario Public Library
1850 Ridge Rd.
Ontario, NY 14519

PATRON REGISTRATION FORM

DATE: _____

STAFF INITIALS: _____

NAME: _____ Birth Date: (MM/DD/YYYY) _____

ADDRESS: _____ P.O. BOX _____

CITY/TOWN _____ STATE: _____ ZIP: _____

HOME PHONE: _____ OR WORK PHONE: _____ (a phone # is required)

EMAIL: _____ Email is an official means of correspondence

I hereby agree to obey all rules and regulations of this library and the library system, to pay promptly all fines charged against me for damage to materials and to give immediate notice of any change of address.

APPLICANT'S SIGNATURE: _____

Parent's Signature (if under the age of 14): _____

Office use only:

Circle one: Adult Juvenile **Check, if applicable** Non-OWWL resident

ID Verified _____ **OUT OF OWWL AREA Driver's License # REQUIRED**

Patron Barcode # _____

Upd 5/17