

Dear parents,

On _____, we will be taking a field trip to the Pulaski Public Library. During this visit your child has the opportunity to get his/her own library card. I have enclosed the application for a library card. **Please note that you are responsible for the safe, timely return of all items borrowed on your child's card.** Change of address or lost or stolen card should be reported to the _____ library immediately. Materials borrowed on an unreported lost or stolen card remain the responsibility of the cardholder or guardians.

Children will only be allowed to check out **one** book during tour. No DVDs or other items allowed for checkout on tour.

If they have a library card for any of the North Country Library System libraries which include libraries of Lewis, St. Lawrence, Jefferson, or Oswego Counties they will work at Pulaski Public Library. Please send that card with your child on the day of the tour.

_____ My child has my permission to check out one item during class visit.

OR

_____ My Child already has a library card or has permission to check out one item using my card. Must send card with child.

Pulaski Public Library



www.pulaskinypubliclibrary.org

Pulaski Public Library

4917 N Jefferson Street Pulaski, NY 13142

Library Hours:

Monday	9-5
Tuesday	9-7
Wednesday	9-5
Thursday	9-7
Friday	9-5
Saturday	9-1

Library Use Only: _____
Name (Last) _____ (First) _____ (M) _____

Address _____

Home Phone _____ Cell Phone _____

Email _____

Driver's License/ID# _____ DOB _____

As a patron, I am responsible for all materials borrowed on my card, including any and all accrued fines and replacement costs for damaged materials.

Signature _____ Date _____

(parent must sign for child under age 14 and provide information on back of card)

(Place Barcode Here) (Place Barcode Here) (Place Barcode Here)

If a child under 14 is obtaining a library card, a parent or legal guardian must provide the following information:

Library Card # _____

Name (Last) _____ (First) _____ (M) _____

Address _____

Home Phone _____ Cell Phone _____

Driver's License/ID# _____ DOB _____