

Bag of Books - Registration Form

Group Name	Today's Date (MM/DD/YYYY)			
Meeting Schedule (if known, e.g. 2nd Tuesday of the month)	GDL Branch for Book Bag Pickup			
Billing Address	Street	City	State	Zip Code

Primary Bag of Books Club Contact

Name: _____

Phone: _____

email: _____

Library Card Barcode: _____

I understand that, as the Primary Bag of Books Club Contact, I am responsible for the use of this card, including any fines or fees incurred for late, lost or damaged items. If the card is lost or stolen, I understand that I am responsible for all materials charged to this account until such a loss is reported to library staff. I also agree to give notice of any changes to the list of Book Club Members, Primary Bag of Books Club Contact information, and alternate contact person. The book club agrees to comply with all relevant GDL policies as published on the GDL website (www.thegd.org).

Primary Contact's Signature

Book Club Members

Alternate Bag of Books Club Contact

Name: _____

Phone: _____

email: _____

* Email addresses are used for notification of library-related matters and are kept confidential. **Notification is much faster and more reliable with an email address.**