Bag of Books Registration Form

Please fill out and take to any branch of the Genesee District Library to apply for a Bag of Books library card.

	ickup		
Month Day Year Group Name			
Primary Bag of Books Contact			
Name			
AddressStreet	Oit.		7:-
	City	State	Zip
Phone Number ()			
Email			
How would you like to be notified? Automated Phone Call Email Text Message			
I understand that, as the Primary Bag of Books Contact, I am responsible for the use of this card, inclu I understand that I am responsible for all materials charged to this account until such a loss is reported Contact's information and Alternate Book Club Contact person. The Book Club agrees to comply with all	d to library staff. I also agree to give n	otice of any changes to the P	Primary Bag of Books
Primary Contact's Signature			
Alternate Book Club Contact Name			
	umber ()		
Office Use Only			
Library Card Barcode	Issued By		
Please send Book Club forms to the contact at Beecher-Vera B. Rison			

