

Library Card Application for Connecticut Residents and Connecticut State Employees

Please fill out form. Print completed form and sign.

First Name		Last Name	e			M.I.
Address	'	City		Sta	te	Zip
Phone	Work Phone		E	mail		
State Employee (CT Supreme Ct. Just/	CT General Publi	c or Studen	_	Non-resident	Student C	CT Attorney
State Employees Only						
Agency City	Stat	re Z	Address	Phone		
One of the following types of identification must be provided:						
CT Library Barcode	No.:			<u>or</u>		
CT Drivers License No. AND Date of Birth:						
Your signature indicates that all information you have provided is accurate, and that you have received, read and agree to abide by all applicable rules. Library User Conduct Policy https://ctstatelibrary.org/about/policies/conduct-policy/						
Signature				Date		
	Please i ticut State Librai Collection Servic	ry, 231 Ca		Hartford,		
Minors (under 18 years Adults without identific responsibility for all ob	cation must have a	guarantor.	In both case	es, the perso	on signing ac	cepts
Parent/Guarantor		Signa	ature		Phone	
Address	C	ity		State	Zip Co	de
For Office Use Only						
Rev. July 2018 CSL Barcode #	Ex	xpiration date		Pat	ron Record No.	
<u>I</u>						