



SASKATOON PUBLIC LIBRARY

Library Card Application

PLEASE PRINT

Name on ID _____
LAST / FIRST / MIDDLE

Preferred Name _____

Card Type ☐ Adult (18 & up) ☐ Teen (14–17) ☐ Child (0–13) Birth Date* _____
*FOR TEENS / CHILDREN ONLY. YEAR / MONTH / DAY

Mailing Address _____
APARTMENT / STREET OR BOX

CITY / PROVINCE / POSTAL CODE

Phone _____ Mobile _____ Other _____

Email Address _____

How should we send you notices about holds or overdue items? Choose one.

☐ Email ☐ Text: Wireless provider _____ ☐ Phone

Would you like to subscribe to SPL's Newsletter? ☐ Yes ☐ No

What kind of due date receipt would you prefer? Choose one.

☐ Email ☐ Text ☐ Email & text ☐ Paper ☐ No receipt

Your Personal Identification Number (PIN) is used for accessing your account online.
It is, by default, the last four digits of your telephone number.

If you would like a different PIN, please enter it here: _____ (4 digits)

FOR CHILDREN

Parent/Guardian Name _____ Signature _____

Parent/Guardian ID# (last 4 digits) _____ ID Type _____

Signature _____

LIBRARY USE

Barcode Number _____

Borrowing Type ☐ Verified ☐ Unverified ☐ Temporary ☐ Community Access ☐ Virtual ☐ Other

Identification Information _____

Home Library _____ Employee Name _____