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## **Maryville Public Library Policy**

Section D: PUBLIC ACCESS & SERVICES

**Subject 201:** 5-book Limited Use Card Application, Page 1 of 2

Last reviewed/revised: 2024

## 5-BOOK LIMITED USE LIBRARY CARD APPLICATION

Cardholder's legal name:	Date:
Cardholder's living address:	
Photo ID and Proof of address will be required outreach event in Nodaway County or to a Nursin	d unless this card is being issued to a child at a children's ng Home or Group Home resident.)
Phone:E	mail:
For cardholders under the age of 18, Age:	Date of birth:
Name of Parent or Guardian if applicable:	
Annual fee status	This cardholder's household is within the library taxing district or owns property within the library taxing district. (Proof of taxes paid or residency status may be required.)
(required)	We live outside of the library taxing district and agree to a \$25
Please check one box to	annual fee for a non-taxpayer 5-book library card.
indicate appropriate	We live outside of the library taxing district, within Nodaway County, and are food stamp eligible. (EBT card and photo ID required). We
funding source:	request this \$25 fee be paid for by the Friends of the Maryville Public Library.
FOR STAFF USE ONLY: Date card issued:	Parental Restrictions Notice
Last 6 digits of card #:	
Staff initials:	
	Ds are loaned for 21 days at a time. Patrons may renew items up ooks, DVDs, and items on reserve for another patron. DVDs are
library account. At 2-8 days overdue, the patron's account household address, until all overdue items are returned a which may be the full list price of the item—is added to the maximum of \$10 per card) to cover library costs associated replacement items. For replacement costs paid and not yet exception of the administrative fee. If the household's curbe turned over to a collection agency or to the Nodaway under the Missouri Revised Statutes, sections 570.200 and notices weekly. Two notifications are sent using the borrow the cardholder is responsible for notifying the library in contract the section of the sectio	nd no fees are due. At 30 days overdue, a replacement fee— he patron's account, plus a \$5 administrative fee (per item with a ed with overdue notices, staff time, and processing of et deposited, a refund may be given for items returned, with the mulative item replacement costs exceed \$125, the matter may County Prosecutor's office for criminal prosecution for theft d 570.210. The library's patron database generates overdue ower's preferred method of contact. The third notice is mailed.

materials borrowed on this card issued from this application according to Maryville Public Library's loaning policy.

Date: \_\_

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## **Parental Restrictions Notice**

## Required of all cardholders or parents of minor cardholders:

Please select one of the following two options

NO RESTRICTIONS ON THIS CARD REGARDLESS OF AGE: I do not require any content restrictions on this library card and I provide consent for my Child(ren) to check out and use any and all available library resources with no restrictions on content. (Cardholders can also check here to opt out of restrictions because no minors use this card.)
RESTRICTED CONTENT LIBRARY CARD. I wish loans on this library card to be restricted to items cataloged by MPL as Easy books, and audio, Easy Readers, Youth books and audio, Family DVDs and a limited selection of electronic resources designated by the library to be accessible with this card. Please note that to allow the Library to comply with RSMo 573.550 and 15 CSR 30-200.015, a Restricted Content card will prohibit checkouts of certain items, including those classified by the Library as Young Adult and Adult, as well as Internet, ebooks and streaming video items.
Upon signing this agreement, I'm demonstrating I understand that outside the checkout limitations of this card, Library staff, trustees, or other official persons affiliated with the Library do not have supervisory duty over my Child and that it is my responsibility to monitor the Child's behavior and consumption of library content, in any and all forms.
I have been informed in reviewing this consent form that I have access to the policies of this Library regarding collection development and Citizen's Request for Reconsideration under Missouri State Regulation 15 CSR 30-200.015 and that it is my responsibility to request and review the same if so desired.
PRINTED NAME OF PARENT/GUARDIAN/CARDHOLDER:
SIGNATURE OF PARENT/GUARDIAN/CARDHOLDER:
DATE:
ADDRESS OF PARENT/GUARDIAN:
PHONE OF PARENT/GUARDIAN:

EMAIL OF PARENT/GUARDIAN: \_\_\_\_\_