

Patron Registration

Please Print Clearly

Social Security # _____ DL/Other ID# _____

Name _____

Street Address/Road Name _____

Mailing address _____

City/State/Zip _____

Home Phone _____ Alternate Phone _____

Place of Employment/Alternate Contact _____

Business/Alternate Address _____

E-mail Address _____

Patron type (check only one): _____ Curriculum (please specify) _____ Special Student

_____ Community Patron _____ Juvenile (under 18) _____ Faculty/Staff

Age Category (check one only): _____ Female (18-35) _____ Female (36-64)

_____ Female (over 64) _____ Juvenile female (under 18) _____ Male (18 - 35) _____ Male (36 - 64)

_____ Male (over 64) _____ Juvenile male (under 18)

County of residence (check only one): _____ Avery _____ Mitchell _____ Yancey

_____ Other County/State - specify

Complete this section only if you are under 18: Parent/guardian's complete name

Name of School you attend _____

FOR LRC USE ONLY

Date entered _____ Staff member's initials _____ Barcode _____