Reset Form

Library Card Application

☐ NEW
☐ LOST / DAMAGED ($1.00 fee)

PLAINVIEW-OLD BETHPAGE PUBLIC LIBRARY • 999 OLD COUNTRY ROAD • PLAINVIEW, NY 11803 • (516) 938 - 0077 • FAX (516) 433 - 4645

Individuals who live and work within the Plainview-Old Bethpage Public School district are eligible to receive a free library card.

☐ YOUTH CARD (Ages Newborn - 13)
☐ ADULT CARD (Ages 14 and up)

Name: _____

By signing here, I declare that all information provided is accurate and I agree to accept responsibility for use of the card, all library materials checked out on the card and all charges made against it.

Signature: PARENT/GUARDIAN (if under 18 years old) / SELF _____

Address: _____ APT. # _____

Email Address: _____

Telephone: _____ Mobile Phone: _____

Yes, I would like to receive e-communications about POB programs and services.
Adult Programs Teen Programs Children Programs

Birthdate: _____ *PIN Number: ____ ____ ____ ____ male ○ female ○

*A Pin Number allows you to access your own library account online, to reserve books and media items, to renew books, and to open a S.A.M. account. It can be any easily remembered four-digit number that becomes encrypted upon entering.

If you are not a resident, but are employed in Plainview-Old Bethpage, please indicate the following:

Employer's / Business Name: _____

Address: _____

_____

_____

Phone Number: _____

Two forms of identification, including proof of residency and picture ID are necessary.
Examples of acceptable identification: **PICTURE ID AND ONE (1) OF THE FOLLOWING**

PICTURE ID	PROOF OF RESIDENCE
Drivers License	Pay Check Stub (current)
TOBAY Golden Age Card	Telephone Bill
Non-Driver ID	Tax Bill
Nassau County Golden Age Card	Utility Bill
Student ID	Vehicle Insurance Card
Passport	NYS Motor Vehicle Registration
Alien Registration Card	**Youth:** School Mail, ID, or Bus Pass

Date: _____

Staff: _____

Library Card Barcode: 2 1 9 1 2 0 0 _ _ _ _ _ _ _