

Tewksbury Public Library Card Registration

Name: _____ Date of Birth: _____

Preferred Name (Optional) _____ Pronouns (Optional) _____

E-Mail Address: _____

Would You Like to Receive the Library's Email Newsletter? Please Circle: Yes No

Would you like to receive our weekly Wowbrary emails to be notified of new materials acquired by the library?
Please Circle: Yes No

Cell Phone: _____ Evening Phone: _____ Other Phone: _____

To receive text notifications of when requested items arrive and checked-out items are overdue please Circle: Yes No

Street Address: _____

City/Town: _____ Zip code: _____

Applicant's Signature: _____ Date: _____ Parent or Guardian's Signature: _____

For children under the age of 14: I give permission for my child to have borrowing privileges at the Tewksbury Public Library.

LIBRARY USE ONLY

Staff Initials: _____ If Temporary Card: _____
Barcode: _____ Start date: _____ End date: _____

The Merrimack Valley Library Consortium does not sell, lease, or otherwise distribute or disclose patron name, email address, postal address, telephone number, or other personal information to outside parties.

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