

UK CHILDREN OF FULL-TIME FACULTY AND STAFF

UNIVERSITY OF KENTUCKY LIBRARIES
PATRON REGISTRATION FORM

PLEASE PRINT:

NAME: _____
(Last) (First) (Middle)

SOCIAL SECURITY NUMBER:

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BARCODE:

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PATRON GROUP: UK Children of Full-time

ADDRESS: Check box for preferred address to receive library correspondence

Permanent Address: Home

Address	
City	State/Prov.
Zip/Postal	Country

Home Phone Number

Temporary Address: (circle one) Campus or Department of Parent

Address	
City	State/Prov.
Zip/Speed Sort	

Campus/Department Phone Number

E-mail:

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**** It is the patron's responsibility to notify the library staff of any address change (INCLUDING E-MAIL)****

FOR OFFICE USE ONLY

When entering addresses, click on "hold mail" for any addresses that are not checked as the preferred mailing address. **Note: DO NOT click on "hold mail" for the Permanent Address at any time**

EXPIRES: ONE YEAR AFTER DATE SUBMITTED
PURGE DATE: TWO YEARS AFTER DATE SUBMITTED

STAFF/STUDENT ASSISTANT'S NAME: _____

Revised 06/08/00

**CIRCULATION POLICIES FOR CHILDREN OF FULL-TIME FACULTY OR STAFF
PARENTAL CONSENT FORM
(CHILDREN MUST BE IN THE 9TH - 12TH GRADES.)**

STUDENT'S NAME: _____
GRADE: _____
SCHOOL: _____

PARENT'S NAME: _____
DEPARTMENT: _____
LIBRARY PATRON ID NUMBER: _____

CIRCULATION POLICIES:

1. A maximum of 5 books may be charged.
2. The loan period is 28 days or less depending on the loan policies of the individual library.
3. **NO RENEWALS** are allowed.
4. No holds or recalls may be placed on books.
5. If any books are overdue, no new charges may be made until the overdue books are returned.
6. If the student's library borrowing privileges are suspended because of overdue fines or lost or damaged book charges, the library privileges of the faculty or staff member will be suspended also until the situation creating the suspension is resolved.
7. The student is the sole authorized user of the library card.
8. The library card must be presented when materials are borrowed.
9. Loss of the card or change of address must be reported to the Library immediately.

I accept financial responsibility for materials charged on my child's University of Kentucky library card.

Signature of Parent _____

Signature of Child _____

Date _____