

Vigo County Public Library
Institution/Corporate Borrowers Card Registration

Please Print:

Institution/Corporation Name _____

Address _____

City _____ State _____ Zip _____

Please be prepared to show identification to indicate affiliation with this institution or corporation.

The above Institution/Corporation agrees to follow all library procedures and will be responsible for all materials that are charged to this card.

Signature of Representative _____

Position _____

Only the following **OFFICIAL REPRESENTATIVES** are permitted to use this card.

Name _____

Position _____

Name _____

Position _____

Name _____

Position _____

Staff Use Only:

Date _____

Geog. _____

Intials _____

New _____

I.D. _____

Renewal Date _____