

ECTOR COUNTY LIBRARY PATRON CONTRACT FOR ADULTS

Driver's License/ID#	Date of Birth	
Last Name	First	M.I.
Address		
City	State	Zip
Email		
Phone #	Alternate Phone #	

I wish to borrow library materials from the Ector County Library. I agree to observe all rules established by the library and will be responsible for all materials borrowed on this card, with or without my consent. I also agree to pay any fines or other charges imposed for late returns, mutilation, or loss of library materials or for replacement of patron card.

Signature	Date	
Ector County Reference (Person who can give us your address if you move and we are unable to reach you)		
Name		
Address		
City	State	Zip
Phone #		

LIBRARY USE ONLY- Card #