

**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 \_\_\_\_\_

LIBRARY USE ONLY: \_\_\_\_\_