



KPC Library Card Registration Form

First Name: _____ Middle Initial: _____

Last Name: _____

Mailing Address:

Last 4 Digits of SSN or Student ID Number: _____

REQUIRED FIELD

Please Check One:

KPC Student:

KPC Faculty:

KPC Adjunct:

KPC Staff

Public:

Phone Number: _____ E-Mail Address: _____

Permanent Address

All Library cards remain the property of the University and must be surrendered upon request. This card is not transferable. The library privileges associated with this card are personal to the signer and may NOT be used, assigned, or otherwise transferred to any other person. The signer is responsible for notifying the issuing library of any address change or loss of card. The signer agrees to return all materials borrowed on or before due date and to pay the replacement cost for any materials, lost, stolen, or damaged while in the custody of the signer. The signer agrees to promptly pay any late fines assessed or replacement costs incurred or forfeit signer's library privileges.

Signature: _____ Date: _____

Staff Use Only

Place Patron ID Barcode Here

Remarks: _____

Date Entered: _____ Initials: _____

Student - UG; Faculty - FA; Adjunct Faculty - AF; Staff - SF; Public - PB