



**PASADENA  
PUBLIC  
LIBRARY**

## Registration Form

PLEASE PRINT

Identification Number (Driver's License or ID)
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### Name, Home Address, Phone Number

Last Name		First Name	Middle Initial
Number	Street		Apt. #
City	Zip	Telephone	

### E-Mail Notification

By entering an e-mail address you will receive  
hold/request and overdue notices by e-mail only.

E-Mail Address
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### Work Address

Number	Street	Suite #
City	Zip	Telephone

### For patrons ages 12 and under

Parent/Guardian	School
Signature of Parent/Guardian	

### Optional Information

The following information, used for planning programs, services and applying for grants, is optional and confidential. It is collected for statistical purposes and only composite totals will be used.

Gender:  Male  Female      Birthdate \_\_\_\_\_

Ethnic/Racial Background:

- |  |                                   |                                |                                |
|--|-----------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> American Indian | <input type="checkbox"/> Armenian | <input type="checkbox"/> Asian | <input type="checkbox"/> Black |
| <input type="checkbox"/> Hispanic        | <input type="checkbox"/> White    | <input type="checkbox"/> Other |                                |