



BALTIMORE COUNTY PUBLIC LIBRARY

Baltimore County Public Library: Library by Mail

Last name: _____ First name: _____

Middle name: _____ Sr. / Jr. / III: _____

Street address: _____

Apt #: _____

City, state, zip: _____ County: _____

Home phone number: _____ Cell phone number: _____

Cell provider (Examples: Verizon, Sprint, etc. Must indicate to receive text notification): _____

Email: _____

We will contact you when the requested material is available for pickup to alert you that materials are overdue, etc. How would you like to be notified?

Notification preference (Choose one): email phone (home) phone (cell) text

Interested in e-receipts? yes no

Interested in text notifications? yes no (If yes, must enter cell phone service provider above)

Birth date: _____

State issued ID # (If applicable): _____

Do not write below this line

Entered by: _____ Date: _____



BALTIMORE COUNTY
PUBLIC LIBRARY

