



9533 Kings Highway
King George, Va. 22485

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www.smoot.org

King George Resident Library Card Application
Photo identification is required. All information is confidential.

Last Name

First Name

Middle Initial

Street address or PO Box

City

State

Zip Code

Area Code

Home Phone Number

Area Code

Cell Phone Number

Email Address

Please create a four digit PIN (numbers only)

Notifications by:
(check only one)

Email ☐

Text ☐

Wireless Provider: _____

Complete if 17 years or younger.

Age: 0-11 12-17 Birthdate: ____/____/____
Month Day Year

Parent/Guardian Name: _____
Please print

I agree to comply with all library rules and to accept responsibility for all materials borrowed or services used.
I understand that I am the only person authorized to use my library card.

I understand that all library materials, including books, audiovisual items, electronic databases and the Internet, are available to all library users. I understand that I am responsible for my child's use of all library materials, including the Internet.

Signature of applicant _____ Date: _____
or parent/guardian if applicant 17 years or younger

Application must be submitted in person.

Revised 2/2025

FOR OFFICE USE ONLY

Initial: _____ Date: _____

☐ Adult Library Card

☐ Juvenile Library Card

Check all that apply:

☐ Driver's License

☐ Photo Identification

☐ Bill / Mail

☐ Personal Check

☐ School document

☐ Deed / Lease

☐ Other: _____