YOUTH REGISTRATION FORM

| YOUTH'S NAME | | |
|--|--------------------------------|--------------------------------|
| last | first | middle initial |
| YOUTH'S BIRTHDATE: | ** | |
| day / month / year | r | |
| YOUTH'S SCHOOL (if not a Penticton resident | t) | |
| | | |
| PARENT/GUARDIAN'S NAME | | |
| last | first | middle initial |
| STREET ADDRESS | | |
| | | |
| CITY | POSTCODE | |
| HOME OF LEVIOUR | WORK PHONE | |
| HOME /CELL PHONE | | |
| (required) | (optional) | |
| HOLD/OVERDUE NOTIFICATION (please cho | oose one): PHONE | EMAIL TEXT |
| EMAIL | | |
| (If it is the better way to contact you) | | |
| į į | | |
| As a parent or guardian, I accept full responsib | vility for the type of materia | al borrowed on this card. |
| | | |
| I agree to comply with the rules of the library a due books or materials borrowed with this card | - | • |
| Signature of Parent or Guardian | | |
| | | |
| ** Due to privacy regulations, when the youth t | turns 18, they become solel | y responsible for their cards. |
| | | |

The Penticton Public Library respects your privacy and is committed to protecting your personal information. Your personal information will be collected for library card registration pursuant to Section 26(c) of *The Freedom of Information and Protection of Privacy Act* and only used for this purpose. This form will be destroyed. Information in electronic records will be kept securely until 2 years past the child's 18th birthday, or until the card has been inactive for 3 years. If you have any questions about the collection, access, use, or disclosure of your personal information, or would like to review that information, please contact: Heather Buzzell, Chief Librarian and Penticton Public Library privacy officer at privacy@pentictonlibrary.ca or 250-770-7784.