



beloit public library

## Book Buddy Application

(Please print)

Name \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Age \_\_\_\_\_ School \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Parent/Guardian Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Date**