

KENT FREE LIBRARY

Access to Library Account Consent Form

An adult's library account and personal information are handled confidentially, as allowed by Ohio law, unless the adult chooses to waive that right by granting permission to others.

A minor's library account and personal information are confidential to all except the child's parent(s) or

I do NOT grant permission to anyone other than myself to use this card or have access to my library account.

I would like the following individual(s) to have access to my account:

(please print first and last name above)

(relationship)

(please print first and last name above)


(relationship)

Anyone who has this library card may use or have access to my library account and personal information.

I understand that the information from this library card application and all account information, which includes telephone numbers, home address, e-mail address, titles and subjects currently checked out or on hold, due dates, accrued fines and fees, will be accessible.

I also understand that I must visit the library in person if I wish to revoke this document or change the individuals who have access to my account.

Name *(please print)*: _____

 KENT LIBRARY FREE FOR THE PEOPLE	Monday-Thursday 9-9	Friday 9-6	Saturday 9-5	Sunday 1-5
	312 West Main Street Kent, OH 44240			
	330.673.4414			
	www.kentfreelibrary.org			