



**Minor Cardholder application
Howe Library**

I accept financial responsibility for library items checked out by my child.

I understand that NH Statutes guarantee the confidentiality of Library records for card holders of any age. If I am providing my email address for courtesy reminders and overdue notices, my child has given permission for me to view his/her library account.

Name of Child: _____

email address: _____

Street address: _____

Zip code: _____ Town: _____ State: _____

Phone w/area code _____

Name of Parent or Guardian (Please print): _____

Signature: _____ Date: _____

To return this form via USPS:
Circulation
Howe Library
13 South Street
Hanover, NH 03755

To return via email:
Scan completed form & send with subject:
Dresden Student Library Card
circulation@thehowe.org

A library account will be created for your child and the card mailed to the address listed

If accepting financial responsibility for more than one library account, list additional children here:

Name of Child: _____

Name of Child: _____

Name of Child: _____

Name of Child: _____