



Agency Cardholder

ORGANIZATION INFORMATION

Name of Organization _____

Primary Contact Name _____

Mailing Address _____ Suite # _____

City State Zip Borough/Township

Primary Telephone (_____) _____ ext. _____

Notice Preference:

Phone E-mail

E-mail _____

We will automatically send notifications for overdue/reserve item to you.
Please note that notices for billed items will be sent by standard US mail.

The following individuals also have the ability to access this account and pick up reserve items (proper ID may be requested).

Name _____ Title _____

Name _____ Title _____

Name _____ Title _____

Name _____ Title _____

Organization Name

Confidentiality:

It is the policy of Carnegie Library of Pittsburgh that all library records are kept confidential and only shared with the cardholders and/or as a result of appropriate legal orders. I certify, by my signature, that I am over 18 years of age, represent the named organization above and assume responsibility for the use of this card.

Signature

Print Name Title

Privacy policy available at www.carnegielibrary.org

AGENCY

STAFF ONLY

New Renewal

PIN Entered

Reg. Library

P Type

Boro/Twp

Home Library

Barcode

Expiration Date

Staff Name

Today's Date