

**CAL STATE UNIVERSITY DOMINGUEZ HILLS  
LIBRARY**

**USER APPLICATION - Ptype: 6= CAMS**

NAME: \_\_\_\_\_  
Last First Middle Initial

MAILING ADDRESS: \_\_\_\_\_  
Street Address/PO box Apt.no.,bldg/Room

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

**LIBRARY NOTICES (OVERDUES, FINES, HOLDS ETC.) WILL BE SENT VIA EMAIL AS A COURTESY TO YOU.**

EMAIL ADDRESS: \_\_\_\_\_

SCHOOL I.D NUMBER: \_\_\_\_\_

MY SIGNATURE BELOW CERTIFIES: that the information on this application is true and correct; that I agree to follow all library rules, to pay promptly for overdue, lost and damaged materials, and inform the library immediately of any change of name or address, or loss of library card; that I understand that I am responsible for all materials checked out on this card. In addition to withholding services, any debts 30 or more days past due to may be referred to California Franchise Tax Board for possible offset from amounts due the debtor by the State, and to outside credit reporting and /or collection agencies.

Debtors are obliged to pay all costs of collection, including attorney fees and court costs.

*APPLICANT'S*  
SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**PARENT'S**  
**SIGNATURE** \_\_\_\_\_

A Parent's or Legal Guardian's signature is required for young people under 18, and certifies that the parent/guardian accepts responsibility to ensure that the young person abides by the above certification.

Library use only:

Issued By \_\_\_\_\_

Date \_\_\_\_\_