

Library Card Application

Eglin Community Library

Sponsor's Last, First, Middle Initial: _____

Service Branch (circle one):

AAFES | Air Force | Army | Coast Guard | Marine Corps | National Guard | Navy | Space Force

Sponsor's Category (circle one):

Active Duty | Civilian | Contractor | Foreign Military | Reserves | Retiree

Sponsor's Official Email: _____

Sponsor's Personal Email: _____

Sponsor's Cell Phone: _____

Sponsor's Work Phone: _____

1. Dependent's Last, First, Middle Initial: _____

Dependent Category (circle one): Spouse | Child | Other (but authorized)

Dependent's Email: _____

2. Dependent's Last, First, Middle Initial:

Dependent Category (circle one): Spouse | Child | Other (but authorized)

Dependent's Email: _____

3. Dependent's Last, First, Middle Initial: _____

Dependent Category (circle one): Spouse | Child | Other (but authorized)

Dependent's Email: _____

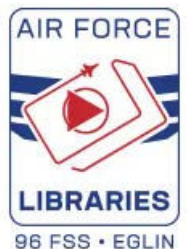
4. Dependent's Last, First, Middle Initial: _____

Dependent Category (circle one): Spouse | Child | Other (but authorized)

Dependent's Email: _____

Signature: _____

Date: _____



DOD sponsor financially responsible for all items checked out on all dependent's accounts. Lost and/or damaged items must be replaced with brand NEW items selected and approved by the Supervisory Librarian, at the current market value. No depreciation for used materials is authorized (DAFI 34-150).