



Group Membership Forms - Intake Form

Please attach this page to your package of library card registration forms.

Teacher/Group Leader:

Email:

School/Organization:

Phone Number:

COMPLETED CARDS TO BE PICKED UP AT

BRANCH

☐

I have checked that the information on each membership form is legible.

If you have booked a visit, please complete the following.

Visit Date:

KFPL Staff Host:

FOR KFPL STAFF

Package was dropped off at

Branch on

(date).

☐

Processing Complete

Please send completed cards to the branch listed at the top of the sheet.