



# Library Card Application

<b>End of Deployment:</b>	<b>Name</b> (Last, First, Middle Initial):	<b>Branch of Service:</b>
<b>Mailing Address</b> (NAVSTA & USNH—Box #/JTF-Command):		<b>Home &amp; Work Numbers:</b>
<b>Email Address</b> (Work or Personal):		<b>Supervisor's Name &amp; Number:</b>

## Authorized Dependents

<b>Dependent 1:</b>	Last Name:		Middle Initial:
	First Name:		
<b>Dependent 2:</b>	Last Name:		Middle Initial:
	First Name:		
<b>Dependent 3:</b>	Last Name:		Middle Initial:
	First Name:		
<b>Dependent 4:</b>	Last Name:		Middle Initial:
	First Name:		

I hereby apply for the privilege of using the MWR Community Library and agree to comply with all Library policies (available at the circulation desk). I accept responsibility for all materials, fees, and any loss incurred through my and my dependent's use of the MWR Community Library.

Sponsor or Spouse Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Staff Initials: \_\_\_\_\_