



**Iowa Tribe of Oklahoma Library
Membership Registration Form**

Library Card Number: _____
Expiration Date: _____
<i>(Office Use Only)</i>

First Name: _____ Last Name: _____ Date: _____

ITO tribal member roll number: _____

Mailing Address: _____

City: _____ State _____ Zip _____

County (circle): Lincoln Payne Other: _____

K-12 school (if applicable): _____ Grade _____

Contact Phone Number: _____

Email Address: _____

If minor, Guardian Name: _____

Promptly notify us of any change of phone number, address, or email. Accounts must be renewed annually.

The following boxes must be checked before submitting this application:

Utility bill attached

Photo ID attached (If under 18, parent/guardian ID)

I agree to comply with the Iowa Tribe of Oklahoma Public Library Policies, found online at:
<https://www.bahkhoje.com/native-services/library/>

Signature: _____ Date: _____

Guardian Signature (If under 18): _____ Date: _____

For remote registrations, please email completed application, copy of photo ID, and copy of utility bill to: **itolibrary@iowanation.org**