

Get a Library Card

You must have JavaScript enabled to use this form.

Full Name

Title

Title

- None -

▼

Enter other...

First

Middle

Last

Suffix

Address

Address

Address 2

City/Town

State/Province

- None -

▼

ZIP/Postal Code

Country

- None -

▼

Rural or city? (required)

☐ Rural

☐ City

☐ Not Sure

County

Mailing address if different

Phone number (required)

Phone type

☐ Cell

☐ Home

Email

Have you ever had a Granger Public Library card before? (required)

☐ Yes

☐ No

☐ Is this card for a minor (under age 14)?

☐ Yes

☐ No

If yes, please provide parent/guardian name

Birth Date of Applicant

☐ I agree to be responsible for all materials borrowed with this card and for all fines incurred. I agree to notify the library of any changes of address or if my card is lost or stolen.

☐ No

Date

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