



Tiffin-Seneca Public Library Registration Form

Child's Name: _____

Date of Birth: _____

Phone: _____

Adult Contact: _____

Number of Books Read	Date Completed
1-100	
101-200	
201-300	
301-400	
401-500	
501-600	
601-700	
701-800	
801-900	
901-	

Awarded Final Certificate _____

Book _____

Photo release: Yes/No (on back)

Tiffin-Seneca Public Library
PHOTO RELEASE FORM

PATRON NAME (please print): _____

DATE: _____

I give permission for my photograph and/or video to be used for advertising and promotion for Tiffin-Seneca Public Library. I also acknowledge that the Library may choose not to use my photo at this time, but may do so at its own discretion at a later date.

PATRON or GUARDIAN SIGNATURE: _____

STAFF SIGNATURE: _____

June, 2014