



Library Card Application

Disclosure of Library Records Consent Form

The New City Library is committed to maintaining and protecting the privacy and confidentiality of our patrons and their activity on the premises. We uphold Section 4509 of the *State of New York Civil Practice Laws and Rules*, which states:

§4509. Library Records

Library records, which contain names or other personally identifying details regarding the users of public, free association, school, college and university libraries and library systems of this state, including but not limited to records related to the circulation of library materials, computer database searches, interlibrary loan transactions, reference queries, requests for photocopies of library materials, title reserve requests, or the use of audio-visual materials, films or records, shall be confidential and shall not be disclosed except that such records may be disclosed to the extent necessary for the proper operation of the such library and shall be disclosed upon request or consent of the user or pursuant to subpoena, court order or where otherwise required by statute.

Patrons who wish to allow family members or caregivers the ability to pick up reserved items or to access their library records, including but not limited to, information about holds placed, items checked out, and due dates; **please complete the information below. We request that the library card holder be present when submitting the form. If additional assistance is needed, feel free to contact New City Library at (845)634-4997.**

I give the New City Library permission to release my library circulation information, including placing and picking up holds, titles held, due dates, etc., to the individuals listed below. Only authorized individuals will be allowed access to my library record information. I understand that revocation of this consent must be made in writing. I am aware that libraries outside of New City Library do not have to honor this request.

Name _____ Barcode _____

Signature _____

Date _____

Please list the names, addresses and telephone numbers of the authorized individuals (NOTE: All patrons who are granted access to any account must be **over the age of 16** and present picture ID or library card.
