

TEXSHARE MEMBERSHIP APPLICATION

John F. Moss Library
7101 University Ave., 3rd Floor South
Texarkana, TX 75503

Name of Sponsoring Institution

Last Name

First Name

Address

Telephone Number

CWID or Borrower ID Number

E-Mail Address

Date

Membership Expiration Date

TexShare Agreement for John F. Moss Library

I _____ agree to abide by the rules and regulations set forth by TexShare, my home library and the lending library. I agree to pay for books and fines that are my responsibility. I understand that if I do not abide by these rules, I will be asked to relinquish my TexShare card and all rights associated with it.

“State law requires that you be informed of the following: (1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.”