



570 Taxter Road, Suite 400
Elmsford, NY 10523-2337
phone 914-674-3600
fax 914-674-4185
www.westchesterlibraries.org

DATE: _____

APPLICATION FOR FEE-PAID NON-RESIDENT
LIBRARY CARD

I apply for the right to use any of the Westchester Library System libraries. I agree to comply with all library rules and regulations, and to give immediate notice of any change of address.

SIGNATURE _____

The acceptance of this application for a fee-paid, non-resident Westchester Library System card entitles the bearer to use any WLS member library for one year.

NAME (Please print): _____

ADDRESS: _____

STATE & ZIP CODE: _____ PHONE: _____

Please enclose check for \$75.00 made payable to the WESTCHESTER LIBRARY SYSTEM, 570 TAXTER ROAD – SUITE 400, ELMSFORD, NY 10523-2337

Any questions, please call Karen Kelly at 914-231-3230. Thank you.