MCLINC EMAIL NOTIFICATION AUTHORIZATION

COMPLETE AND BRING TO A MCLINC LIBRARY

(NOTE: Abington Library will not accept forms from patrons of other libraries and Abington patrons must request this service in person at the Abington Library)

(PLEASE PRINT)

_____ _____ _____

Last Name First Name Middle Initial

_____

Address

_____ _____ _____

City State Zip Code

__ __ __ __ __ __ __ __ __ __ __ __ __ __ _____@_____._____

Barcode (14 digits) Email Address

I authorize the libraries in the Montgomery County Library and Information Network Consortium (MCLINC) to use email notification for library business related to my patron account.

I understand that by supplying my email address I am requesting email notification regarding library materials and my account.

I understand it is my responsibility to check my patron account, and that MCLINC cannot be held responsible for email notices that do not reach my address.

I understand that email communication is not secure and that other members of my household with shared email accounts may view my personal account information, including the titles of items I have borrowed or may wish to borrow.

I understand that I may reverse this authorization by contacting MCLINC with my request to be removed from the email notification system, or by requesting removal of my email address from my patron record. Requests will be processed within 7 business days of receipt.

Your Signature _____

Parent/Guardian Signature (if under 18 years of age) _____

Date _____ **Phone** (_____) _____-_____

Please be sure to notify MCLINC whenever your email address changes!

Update your address with the Change Account link, or email webmaster@mclinc.org.

LIBRARY USE ONLY

Home Library: _____ Account Updated: Date _____ Staff Initials _____ Library _____