



LIBRARY COMMISSION CHAIR  
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Mullica Hill HQ Branch  
Glassboro Branch  
Greenwich Township Branch  
Logan Township Branch  
Newfield Public Library  
Swedesboro Branch



BOARD OF  
COUNTY COMMISSIONERS

COUNTY OF GLOUCESTER  
STATE OF NEW JERSEY

COMMISSION DIRECTOR  
**Frank J. DiMarco**

COMMISSIONER  
**Lyman Barnes**  
Library Liaison

The Gloucester County Library System (GCLS) complies with all state and federal rules and regulations against discrimination in admission to, access to, or operations of its programs, services, and activities. In addition, the GCLS encourages participation of people with disabilities in its programs and activities and offers special services to all residents 60 years of age and older. Inquiries regarding compliance may be made to [ADA@gcls.org](mailto:ADA@gcls.org), or directed to the GCLS ADA Coordinator at (856) 223-6019 / New Jersey Relay Service 711.

**Teacher's Name:**

**Grade Level:**

In cooperation with your school, we are sending home a registration form so you can enjoy the privilege of having your own GCLS library card. If you do not have a library card with the Gloucester County Library System, please fill out the following information. **Parent's Signature Required.**

***GCLS LIBRARY CARD REGISTRATION FORM***

**PLEASE PRINT:**

**\*Student's first name:**

\_\_\_\_\_

**\*Student's last name:**

\_\_\_\_\_

**\*Student's birth date and year:**

\_\_\_\_\_

**\*Address:**

\_\_\_\_\_

**\*City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**\*Municipality/Township:** \_\_\_\_\_

**\*Phone with area code:** \_\_\_\_\_

**\*Parent/Guardian's Name:** \_\_\_\_\_ **Parent/Guardian's Signature:** \_\_\_\_\_

\_\_\_\_\_

**Email address optional:** \_\_\_\_\_

**Notification Preference Text, Phone Call, or Email:** \_\_\_\_\_