

Fort Walton Beach Public Library Registration (Adult)

Office Use

Staff Initials: _____

ID: _____

MemProfile: _____

Barcode: _____

Please print clearly:

Last Name: _____

First: _____ Middle: _____

Street: _____ Unit: _____

City: _____ Zip: _____ Phone: _____

Email: _____ DOB: _____