



## **Consent to Disclose Personal Information Form**

Pursuant to the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA)

I \_\_\_\_\_ authorize the Peterborough Public Library  
*Print cardholder name*

to allow \_\_\_\_\_ and/or  
*Print name of friend/family member*

\_\_\_\_\_ to use my library card.  
*Print name of friend/family member*

They may pick up any materials I have placed on hold. They will have access to my library account, which includes information about other materials I have borrowed and any outstanding fines or charges.

**I understand that by signing below I take responsibility for any items borrowed on my library account.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of library card holder

Patron barcode number: 2312100 \_\_\_\_\_