**HATCH PUBLIC LIBRARY**
**CUSTODIAL PARENT/GUARDIAN CERTIFICATION**
**FOR ACCESS TO CHILDREN'S RECORDS**

I, _____, hereby certify that I am the custodial parent or
(Requestor's Name)

guardian for _____
(Child's Name, Address, and Date of Birth)

_____

and pursuant to 43.30 Wisconsin Statutes, hereby request to review the following library

records pertaining to _____'s use of the library's
(Child's Name)

documents or other materials, resources, or services.

Required Records: ___Current Items Checked Out

___Current Overdue Materials

___Outstanding Fines and Fees

___Current Holds

The Hatch Public Library will not release personal information about this child.

The Hatch Public Library maintains only current records on customer use of the Library.

Signed and certified by: _____ _____
(Custodial Parent or Guardian) (Date)

Approved: June 16, 2004