

Sex Offenders Against Minors Library Use Application

Name: _____

Birthdate: _____

Address:

Telephone: _____

Specific Offense:

Probation/Parole Officer:

Name: _____

Telephone: _____

Please explain why you feel you are not a risk to minors and should be granted permission to be on/in the premises of the Hudson Public Library.

Incomplete applications will be denied. Applicants who provide false information will be permanently banned.