

## **Homebound Service Application**

Name:		
Last	First	Middle
Birthdate:	Phone Number:	
Address:		
Do you already have a library card?	If so, what i	s the number?
Delivery is twice a month. Time of day for Tuesday.	r delivery is betwe	en 1pm-2pm every other
What material format would you like to r	eceive (ex. large print,	audio, DVD)?
How many items would you like to receiv	e at a time?	
Please answer the following questions so we may l	be better able to selec	t books of interest to you:
Specific/General Reading Interests	Favorite Aut	hors/Titles:
Preferred Reading Level:		
Caldwell Public Library is dedicated to the idea of Outreach Service strives to meet this ideal by prov come to the library because of age, illness, or disal other library materials on a regular schedule to the	viding information and pility. We will make ev	d materials to those who cannot
Homebound users, as well as all users of the librar Please do not give or loan these materials to other the materials while they are in their possession.		
If you plan to be away from home during your sch Homebound Services Coordinator, Monique Gade reschedule your pick up/delivery date.		
Signature:		Date:

Contact Information: Monique Gaddy

