# Application for Homebound Library Services <br> Library contact- Myrna Sigal ext 5 

Name (please print) $\qquad$
Street Address $\qquad$
City $\qquad$ Zip Code $\qquad$ Email $\qquad$
Phone Number $\qquad$
Emergency Contact:
Name $\qquad$ Phone Number $\qquad$

## Eligibility- please check the reasons why you require Homebound Library Service

Visual Impairment $\qquad$ Physical Disability $\qquad$ Recovery from surgery or injury $\qquad$
Other (Please explain) $\qquad$

## Release Form and Service Agreement

By reading the following program policies and signing below, I agree to hold harmless and release the West Nyack Public Library, its officers, agents, employees and representatives from any loss, liability, claim, suit or judgement that may arise out of or in conjunction with the library homebound delivery service. Further I understand that:

- I may select specific titles from the library collection or allow library staff to select titles for me based on the preferences indicated on the following page.
- Deliveries will be made to my home on a scheduled basis.
- The library representative will only be available for scheduled deliveries and assistance in selecting materials. He/she will not assist with daily living activities or offer advice on financial or personal matters.
- I will be responsible for any library materials that are lost of damaged while checked out to me.
- I may become ineligible for the program if I do not abide by these guidelines.

Signature (if the applicant is under 18 years or age, a parent or guardian is required to sign.)
Date $\qquad$


## West Nyack Free Library

65 Strawtown Road
West Nyack, New York 10994-1898 | (845)358-6081
www.westnyacklib.org

## Preferences

Media Type
__ Regular Print
__Large Print
_Audiobooks: CD
ebooks
__Movies: DVD
_Music CDs
_Magazines

Fiction Genres
Action/Adventure
_Classics
__Espionage
__Family Sgas
__Fantasy
__Graphic Novels/Comic Books
__Historical
__Humorous
__Mystery/Detective
__Religious
__Romance (spicy)
__Romance (cozy)
__Science Fiction
__Short Stories
__Suspense
__Thrillers

Non Fiction Subjects
___Arts \& Crafts
_-_Biography
___Business and Economics
___Computers and Technology
___Cooking
___Gardening
___Government \& Politics
___Health \& Medicine
___History
__-_Humor
___Poetry \& Literature
__-Psychology \& Self-help
___Religion \& Philosophy
__-_Science \& Nature
__-_Sports \& Recreation
___Travel \& Adventure

List some of your favorite authors: $\qquad$

I do not wish to receive materials that contain:
$\qquad$ Explicit descriptions of sex

Do you currently have a West Nyack Library card? $\qquad$ Yes $\qquad$ No

Do you on a computer or device with internet access? $\qquad$ Yes
___ No

