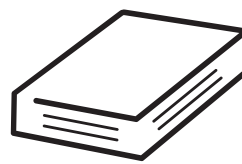


Outreach Department Homebound Application



ELYRIA PUBLIC
LIBRARY SYSTEM

Name & Information

Name: _____

Address: _____

City & Zip Code: _____

Phone: _____

Email: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Library Card # _____ No Card

I am eligible for this service because: (Please check all that apply)

- I have a physical impairment
- I have a visual impairment
- I have chronic illness.
- I have a temporary or serious injury
- Other _____

Which format(s) are you requesting?

- Books
- Audio Books
- DVD Movies
- CD's
- Magazines

Which formats can you use?

I can read books in Standard Print typeface, but prefer Large Print: Yes No

I can ONLY read books in Large Print: Yes No

I can't hold heavy books: Yes No

I own the following equipment:

- DVD Player
- Blu-Ray Player
- CD Player
- Headphones



- Request Only:** Please send me the exact library materials that I request by title.
- Reader's Advisory:** Please send me your selections in addition to my title requests.

Please check your reading preferences:

- Fiction
- Non-Fiction
- Both

Favorite Genres (Check all that apply):

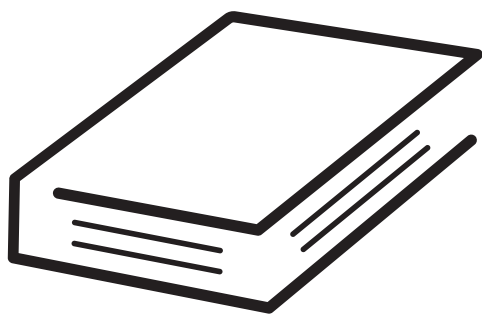
- Adventure
- History
- Religion
- African-American
- Horror
- Romance
- Best Sellers
- Sci-Fi /Fantasy
- Humor
- Classics
- Self-Help
- Travel
- True Crime
- Christian
- Biographies
- Finance/Business
- Politics
- Nature/ Animals
- Westerns
- Mysteries
- Other: _____

List three favorite authors:

1. _____
2. _____
3. _____

Any special instructions or comments:

If you have any questions please call the Outreach Department at 440-324-9831.



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