**NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ APT# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_\_\_\_\_\_\_\_ ZIP \_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I am a resident of the Township of Bloomfield who is unable to use the facilities because**

**(check all that apply):**

**\_\_\_\_\_\_\_\_\_\_\_ I have a physical disability**

**\_\_\_\_\_\_\_\_\_\_\_ I have a visual disability**

**\_\_\_\_\_\_\_\_\_\_\_ I have a chronic illness**

**\_\_\_\_\_\_\_\_\_\_\_ I am experiencing a loss of mobility associated with the aging process**

**\_\_\_\_\_\_\_\_\_\_\_ I am a caregiver for a person with one or more of the above limitations**

**For Temporary Application ONLY:**

**\_\_\_\_\_\_\_\_\_\_\_ I am experiencing a short-term loss of mobility associated with surgery/illness and request this service for a finite period of time**

**I give permission to the Bloomfield Public Library to keep a record of the library materials sent to me in order to avoid duplication. This information is confidential.**

**Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NOTE: All Homebound Service deliveries are done weekly at a day and time determined by the Bloomfield Parks and Recreation Department, in collaboration with the Bloomfield Public Library.**

**Please send this application to:**

**Bloomfield Public Library**

**90 Broad St**

**Bloomfield, NJ 07003**

**ATTN: Jessica, Circulation Department**

**MATERIAL PREFERENCE:**

**PLEASE CHECK ALL THAT APPLY:**

**\_\_\_\_\_\_\_\_\_\_\_ I prefer large print books**

**\_\_\_\_\_\_\_\_\_\_\_ I prefer hardcover books**

**\_\_\_\_\_\_\_\_\_\_\_ I prefer paperback books**

**\_\_\_\_\_\_\_\_\_\_\_ I prefer audio (talking) books**

**I do not wish to receive materials that contain:**

**\_\_\_\_\_\_\_\_\_\_\_ Strong Language**

**\_\_\_\_\_\_\_\_\_\_\_ Violence**

**\_\_\_\_\_\_\_\_\_\_\_ Explicit Sexual Descriptions**

**\_\_\_\_\_\_\_\_\_\_\_ Other, please explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MATERIAL SELECTION INFORMATION**

**Bloomfield Public Library will send specific titles you request if they are available, or materials will be chosen for you. If you wish to have materials selected for you, the Library needs information about your book and subject interests. Please check the types of books and subjects you prefer:**

**\_\_\_\_\_ FICTION**

**\_\_\_\_\_ NON-FICTION**

**\_\_\_\_\_Best Sellers \_\_\_\_\_Religion/Inspirational**

**\_\_\_\_\_Mystery \_\_\_\_\_Biography**

**\_\_\_\_\_Historical Fiction \_\_\_\_\_Cooking**

**\_\_\_\_\_Spy/Espionage \_\_\_\_\_Poetry/Plays**

**\_\_\_\_\_Classics \_\_\_\_\_Sports**

**\_\_\_\_\_Short Stories \_\_\_\_\_History**

**\_\_\_\_\_Other**

**Favorite Authors: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Favorite TV Shows: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Specific titles may be requested over the phone at any time by calling 973-566-6200.**

**Materials are subject to Bloomfield Public Library availability ONLY.**