

**APPENDIX A
REQUEST FOR HOME LIBRARY SERVICE**

POLICY 1080

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REQUEST FOR HOME LIBRARY SERVICE FORM

Individuals who are interested in receiving home library service are asked to fill out this form. For more information, please see [NBPLS Policy 1080 – Home Library Service](#) available at <http://www.gnb.ca/publiclibraries>.

YOUR CONTACT INFORMATION:

Name: _____

Address: _____

Phone number: _____

Year of birth*: _____

*THE YEAR OF BIRTH IS COLLECTED TO MEASURE THE USE OF OUR SERVICES BY PATRONS OF DIFFERENT AGE GROUPS AND TO BETTER PLAN SERVICES BASED ON OUR USER DEMOGRAPHICS.

Your library card number: 2 9525 _____

If you do not have a library card:

- I agree to be responsible for the use of all library services and materials I borrow, in accordance with library rules and regulations: Yes: No:

Email address: (optional**) _____

**IF YOU WOULD LIKE TO RECEIVE AN EMAIL NOTIFYING YOU IN ADVANCE OF WHEN YOUR BORROWED MATERIALS ARE DUE FOR RETURN, PLEASE PROVIDE YOUR EMAIL ADDRESS.

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WHAT IS YOUR LANGUAGE PREFERENCE FOR SERVICE?

- English French

WHAT IS YOUR LANGUAGE PREFERENCE FOR LIBRARY MATERIALS?

- English French Both

PLEASE INDICATE THE TYPE OF HOME LIBRARY SERVICE YOU ARE REQUESTING:

- Delivery by a library volunteer. This means a library volunteer will deliver materials to your home on a scheduled basis, typically, every six weeks.
- Delivery by a family member or friend. This means you can determine with your family member or friend how often you would like to receive materials.

Please provide the name of the family member or friend who would check out library materials on your behalf with your library card:

Name: _____

Address: _____

Phone number: _____

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HOW WOULD YOU LIKE TO SELECT MATERIALS? PLEASE CHECK ALL THAT APPLY.

- I will select my own
- I would like the library to select materials for me
- I would like a family member/friend to select materials for me (where applicable)

WHAT STYLES/TOPICS/FORMATS OF LIBRARY MATERIALS WOULD YOU LIKE? PLEASE CHECK ALL THAT APPLY.

Fiction

- Comics
- Ghost Stories / Horror
- Indigenous
- Mystery
- Romance
- Science Fiction / Fantasy
- Short Stories
- Western
- Other:

Non-Fiction

- Animals and Pet Care
- Biographies
- Canadian History
- Cooking
- Gardening
- Health / Medicine
- Indigenous
- Science and Technology
- Self-Help and Psychology
- Travel and Geography
- World History
- Other:

Formats

- Easy to Read
- Board Books
- Large Print
- Paperbacks
- Picture Books
- Audio-visual (e.g. audiobooks, CDs, DVDs)

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PLEASE PROVIDE EXAMPLES OF AUTHORS YOU WOULD LIKE TO RECEIVE:

SIGNATURE OF PATRON: _____

DATE: _____

PLEASE SUBMIT THIS FORM TO YOUR LOCAL PUBLIC LIBRARY

Every effort will be made to provide materials and services that meet your needs through the Home Library Service. However, limitations may apply in order to balance all of the service and program requirements of the library and the availability of library volunteers.

For more information about the home library service see NBPLS Policy 1080 – Home Library Service available at <http://www.gnb.ca/publiclibraries> or contact your local public library.