

REQUEST FOR HOME LIBRARY SERVICE FORM

About the Service:

Library materials can be delivered to a patron's home when they cannot visit a library due to a disability or illness or lack of transportation. The materials may be delivered by a library volunteer (when available) or designate chosen by the patron.

When service is possible by a library volunteer, it is on a scheduled basis, typically, every six weeks. 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.

Individuals who have the mobility to go to their mailbox may choose to register for Books by Mail.

Eligibility to receive Home Library Service is not limited by age. A doctor's certificate is not required. Home Library Service can be provided on a temporary basis (for someone recovering from an illness) or on a long term basis.

Requests for Home Library Service are to be made to the closest public or publicschool library in the patron's area by submitting this form.

Home Library Service requests using a designate to deliver materials to a patron's home will be automatically approved by the Library Manager/Director.

Library Managers/Directors have the authority to approve Home Library Service requests that require the use of library volunteers. An appeal to a Home Library Service decision may be made in writing to the Library Manager/Director.

Home Library Service patrons can have a maximum of 50 items on loan and a loan period of six weeks, with one renewal. Patrons will be charged replacement costs if materials are not returned.



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. WHAT IS YOUR LANGUAGE PREFERENCE FOR SERVICE? □ English □ French



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

- Delivery by a library volunteer (where available). This means a library volunteer will deliver materials to your home on a scheduled basis, typically, every six weeks.
- Delivery by a designate (family member or friend). This means you can determine with your designate how often you would like to receive materials. (By choosing a designate, I understand that they will have full access to my service information)

Please provide the name of the designate who would check out library materials on your behalf with your library card:

Name:
Relationship to Patron:
Address:
Phone number:
Email:
Email:

As a designate, I understand that the library materials I request or download are for the exclusive use of the home library service patron who is to receive service and not for my own use. I agree to respect the patron's privacy and freedom to read a wide variety of materials and viewpoints. If the patron is not present during the completion of this form, I agree to inform the patron of the terms and conditions of my role. Staff may contact the patron to confirm that consent has been provided. I understand that violation of these terms will result in cancellation of service.

SIGNATURE OF DESIGNATE:	
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SIGNATURE OF PATRON: _	
Date:	

PLEASE SUBMIT THIS FORM TO YOUR LOCAL PUBLIC LIBRARY