

Appendix J: Request for Home Library Service

Home Library Service		
Trail & District Public Library		
Date:		
First Delivery:		
Volunteer (if applicable):		
Registrant Information		
Name:		
Address:		
Phone number:		
Email:		
Library card number:		
Type of Home Library Service:		
<input type="checkbox"/>	Delivery by a volunteer	This means that a volunteer will deliver materials to your residence on a scheduled basis
<input type="checkbox"/>	Delivery by a family member or friend	This means that you can determine how often you would like to receive materials
Please provide the name of the family member or friend who will check out and return library materials on your behalf (if applicable):		
Name:		
Address:		
Phone number:		
Email:		
How would you like to select Library materials? Please check all that apply.		
<input type="checkbox"/>	I will select my own	
<input type="checkbox"/>	I would like the library to select materials for me	
<input type="checkbox"/>	I would like a family member or friend to select materials for me	