

# HOMEBOUND DELIVERY SERVICES APPLICATION

## MEMBER INFORMATION

PLEASE PRINT

Name \_\_\_\_\_

Street Address \_\_\_\_\_ Unit \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Email OR Phone Number \_\_\_\_\_

Facility Name (if applicable) \_\_\_\_\_

Facility Phone \_\_\_\_\_

Barcode Number (new card leave blank) \_\_\_\_\_

# of Items (20 Max) \_\_\_\_\_ Other Authorized Recipient Name \_\_\_\_\_

## PREFERENCES

CHECK ALL THAT APPLY

### Format:

Regular       Large Print       Audiobook       Music CD       DVD

### Fiction:

Action/Adventure       Horror  
 Christian       Mystery  
 Classics       Romance  
 Crime       Science Fiction  
 Fantasy       Thriller  
 Graphic Novels       Western  
 Historical Fiction

### Nonfiction:

Animals       History  
 Auto/Biography       Hobby  
 Cooking       Memoirs  
 Crafting       Poetry  
 Fine Arts       Religious  
 Gardening       Sports  
 Health       Travel  
 True Crime

Author(s) you like: \_\_\_\_\_

Authors(s) you dislike: \_\_\_\_\_

Last book you really enjoyed: \_\_\_\_\_

Other delivery or preference notes: \_\_\_\_\_

I understand I am responsible for this card and all materials checked out on this card. I am further responsible for any charges that may result from loss or damage of materials borrowed. I authorize the Warrenville Public Library District to record and use information from my checkout history for reader's advisory, as well as add a library email to my account to keep track of holds and requests. I further acknowledge this service is for delivery of library items only.

Signature \_\_\_\_\_ Date \_\_\_\_\_

