

**APPLICATION FOR CUYAHOGA FALLS LIBRARY HOME DELIVERY SERVICE**

DATE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

Phone \_\_\_\_\_ email \_\_\_\_\_

Do you have anyone who is able to pick up books for you? \_\_\_\_\_

Do you have transportation? \_\_\_\_\_

Do you have any sight or hearing impairment? \_\_\_\_\_

Have you completed the Library Home Bound interest survey? \_\_\_\_\_

**You may need to apply for a new card or update an expired card. We will hold your Library Card while you participate in our Home Bound Program. No other individual is able to use this card.**

**Items are checked out to you for one month. These items may be renewed one time before your next delivery is received.**