SAN DIEGO PUBLIC LIBRARY
APPLICATION FOR HOMEBOUND SERVICES

Please Print or type:

Name_____ Date_____

Address_____

City_____ ZipCode_____

Telephone_____ Branch Library_____

Library card number_____

The San Diego Public Library's Homebound Service provides library materials to patrons who are unable to visit the library due to physical illness or disabilities, and who do not have family or friends that are able to provide this service. Library-by-Mail provides services to those homebound patrons with visual impairment significant enough that they are unable to read standard size print.

Indicate why you are requesting homebound services:

☐ physical illness or disability

☐ other immobility

☐ Check box is you have significant visual impairment and are requesting Library-by-Mail services.

I do not have others to provide the requested service. I have been informed of, understand, and agree to the rules and procedures for homebound library services. I declare the above information is true and correct.

Signature_____ Print Name_____

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To be completed by certifying authority (Doctor, Nurse, Librarian, Social Worker). I certify the applicant has the physical illness, disability, or other immobility rendering the applicant immobile for purposes of the homebound service. And, if applicable, significant visual impairment.

_____ _____

Print name of certifying authority *Signature of Certifying Authority*

Title/Occupation _____

Address (Street) _____

City/State: _____ Zip code: _____

Date: _____ Telephone (Daytime) _____

SAN DIEGO PUBLIC LIBRARY
HOMEBOUND SERVICES - PATRON PROFILE

Name_____ Date Service Started_____

Address_____

City_____ Zip Code _____

Telephone_____ Branch Library _____

How many items would you like to receive each month? _____

List any favorite authors you might have:

_____

Are there any books you have particularly enjoyed recently?

_____

Here are some popular fiction and non-fiction categories. Please check as many as you like.

____Romance	____Adventure	____Humor
____Suspense	____General Fiction	____Inspirational
____Romantic Suspense	____Best Sellers	____Science Fiction
____Mystery	____Biographies	____Poetry
____Historical Novels	____Travel	____Animals/Nature
____Westerns	____Cookbooks	____Sports
____History (non-fiction)	____ LGBT	

Other special interests:_____

Please check if applicable:

____ Interested in audiobooks.
____ Interested in music on compact disc.
____ Interested in DVD

Most items are checked out to you for 30 days. You can call in title requests at any time. You are responsible for all items checked out to you.

I understand that I am responsible for all items checked out to me

Signature _____ Print Name_____