ALIS Staff Initial\_\_\_\_



## Home Delivery Service Application

Address			
Telephone		Email	
Emergency Conta	ct	Phone_	
Do you have a fam materials?	aily member who	can assist you wit	th accessing library
	YesN	No	
Frequency of Deli	veries:		
	Every two weeks	Monthly	Only as requested
Format(s) desired:	Regular Print	Large Print	Paperback
	_Book on CD	Music CD	Magazine
	_DVD	Blu-ray	Other:
Additional comments Note: The library may no			
access the Library or M	Iobile Library due to il y and pick-up of librar	llness, disability, careg y materials are done l	District residents who are unable to giver responsibilities, or other by qualified volunteers. These bound customers.
			Date