



# FOUNTAINDALE Public Library District

300 W. Briarcliff Road  
Bolingbrook, IL 60440  
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help@fountaindale.org  
fountaindale.org

## FOUNTAINDALE PUBLIC LIBRARY DISTRICT

### HOME DELIVERY – APPLICATION

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

PARENT/GUARDIAN, IF UNDER 16 YEARS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ APT# \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

#### PLEASE CHECK ALL THAT APPLY:

- I have a physical disability/chronic illness
- I am recovering from surgery, illness, or other medical condition
- I am a parent/guardian of someone with one of the above limitations
- I am unable to come to the library due to lack of transportation.

#### INTEREST INVENTORY:

- I prefer large print materials
- I prefer paperback materials
- I prefer audiobooks
- I prefer CDs
- I prefer DVDs
- I am also registered with *Voices of Vision*, federal talking books program
- Special needs: (please list here)

Additional comments about your reading/listening interests and the format(s) you prefer:

Please return form to:

Outreach Services/Fountaindale Public Library/300 W. Briarcliff Rd/ Bolingbrook, IL 60440  
Office: 630-685-4230

(mt 7-23-15)