

# JACKSON COUNTY PUBLIC LIBRARY BOOKMOBILE APPLICATION

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

STREET ADDRESS:  
\_\_\_\_\_

CITY: \_\_\_\_\_

ZIP: \_\_\_\_\_

TELEPHONE: \_(\_\_\_\_\_)\_\_\_\_\_

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

BIRTHDAY: \_\_\_\_/\_\_\_\_/\_\_\_\_

## EXISTING LIBRARY CARD NUMBER:

\_\_\_\_\_ I don't have a card at this time

## REASON FOR REQUESTING BOOKMOBILE SERVICE:

\_\_\_\_\_ No Transportation      \_\_\_\_\_ Summer Reading

\_\_\_\_\_ Homeschool      \_\_\_\_\_ Other

\_\_\_\_\_ Homebound/Shut-In

## DELIVERY OF BOOKS

\_\_\_\_\_ I can access the bookmobile

\_\_\_\_\_ I need books brought to my door

## WILL A DRIVEWAY/PARKING LOT ACCOMMODATE A

### 20-FOOT VEHICLE?

\_\_\_\_\_ Yes      \_\_\_\_\_ No

## IS CELL PHONE SIGNAL AVAILABLE AT MY RESIDENCE?

\_\_\_\_\_ Yes      \_\_\_\_\_ No

### LIBRARY USE ONLY:

Date Received: \_\_\_\_\_

Card # Checked/Issued: \_\_\_\_\_

Route: \_\_\_\_\_

## HOW MANY BOOKS WOULD YOU LIKE TO RECEIVE EACH VISIT? \_\_\_\_\_ (up to 25)

\_\_\_\_\_ Regular Print

\_\_\_\_\_ Large Print Only

\_\_\_\_\_ Large Print preferred, but regular print if large print is not available

\_\_\_\_\_ Books on Compact Disc (Audio Books)

## FREQUENCY OF VISITS:

\_\_\_\_\_ Every 2 weeks      \_\_\_\_\_ Monthly

\_\_\_\_\_ Appointment Only

## WHAT TYPE OF BOOKS DO YOU LIKE TO READ?

\_\_\_\_\_ Adventure      \_\_\_\_\_ Westerns

\_\_\_\_\_ Mystery/Suspense      \_\_\_\_\_ Fiction

\_\_\_\_\_ Romance      \_\_\_\_\_ Biography

\_\_\_\_\_ Inspirational Fiction      \_\_\_\_\_ History

\_\_\_\_\_ Science Fiction      \_\_\_\_\_ Sports

\_\_\_\_\_ Hobbies (specify \_\_\_\_\_)

\_\_\_\_\_ Other (specify \_\_\_\_\_)

## DO YOU HAVE ANY FAVORITE AUTHORS?

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**PLEASE DO NOT BRING ME:**

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I apply for library privileges and bookmobile service with the Jackson County Public Library and agree to abide by library rules. I accept responsibility for all materials borrowed on this library card, will pay fines and damages charged to me, and will give prompt notice of any changes necessary for bookmobile service. If my account is collected through any court or collection agency, reasonable attorney costs shall be added.

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