Great Lakes Talking Books Advisory & Outreach Center 1615 Presque Isle Avenue Marquette, MI 49855-2811 Toll free 1-800-562-8985 or 228-7697 in the Marquette area

Visit us at http://GreatLakesTalkingBooks.org

Application for Free Library Service

Audio books and Braille books are available to those who are unable to read standard printed materials as a result of blindness, visual disability or physical limitations. All records pertaining to this service will remain confidential, as required by the Michigan Library Privacy Act.

(Please type or print)	[Date	
Applicant name			
Street		Apt. No	
City	Zip	County	
Phone () Date c	of birth//	_Gender M F	
Email			
Person to call if you can't be reached and/or to assist with your account:			
Name	Home phone <u>(</u>)	
Relationship	_Work phone()	
By law, preference in lending books and equipment is given to veterans. Check here if you have been honorably discharged from the U.S. Armed Forces.			

Check the eligibility requirement Under which you qualify

- □ **Blind:** Visual acuity of 20/200 or less in the better eye with correcting glasses or the widest diameter of visual field subtending an angular distance no greater than 20 degrees.
- □ Visual Disability: Unable to read standard printed materials without special aids other than regular glasses.
- Physical Disability: Unable to hold a book or turn the pages as a result of weakened muscle or nerve control due to strokes, arthritis, multiple sclerosis, polio, or other physical conditions that impair the use of arms or hands.
- Deaf-Blind: Severe auditory impairment in combination with legal blindness.
- Reading Disability: Organic dysfunction, such as dyslexia, of sufficient severity to prevent reading. IF THIS BOX IS CHECKED, this application must be certified by doctors of medicine or osteopathy who may consult with colleagues in associated disciplines.

To be completed by certifying authority

(Certifying authority must be a professional such as a doctor, nurse, rehabilitation professional, counselor, therapist, or social worker.)

I certify that the applicant named on the previous page is unable to use standard printed materials for the reason indicated above; and, I certify that I am not a member of the applicant's family.

Signature		Date
Please print information below:		
Your name		
Title and occupation		
Street		
City	State	Zip
Phone ()		

Which library services would you like?

- □ Talking books and/or magazines and a talking book player
- □ Headphones

□ Braille books and/or Braille magazines

- Braille and Audio Reading Download (BARD) service, including instructions on how to register and download talking books or Web Braille books over the Internet from the BARD website and a digital talking book player.
- □ NFB-Newsline newspapers in electronic speech over the telephone
- □ Pillow speaker solely for use by patrons who are confined to bed
- □ Amplifier/headphone system solely for use by patrons with severe hearing loss. (You will receive a separate application form for this.)
- Remote control unit solely for use by patrons with very limited mobility. (You will receive a separate application form for this.)
- Breath switch solely for use by patrons with severe physical disabilities. (You will receive a separate application form for this.)

Equipment is supplied to eligible persons on extended loan. If this equipment is not being used in conjunction with recorded reading material provided by the Library of Congress and its cooperating libraries, it must be returned to the issuing agency.

How often do you want to receive books?

- □ Send/Return: Send another book each time I return one.
- □ Weekly: Send ____ (how many) books each week.
- □ Bi-Weekly: Send ____ (how many) books every other week.
- □ Monthly: Send ____ (how many) books once a month.
- □ On Demand: Send books only when I call to request them.

What is your preferred reading level?

□ Adult	\Box 4 th – 7 th grade
Young Adult	\Box 3 rd – 6 th grade
	$\Box 2^{nd} - 4^{th}$ grade
$\Box 6^{th} - 9^{th}$ grade	☐ Kindergarten – 3 rd grade
\Box 5 th – 8 th grade	□ Preschool – 2 nd grade

Will you accept books with . . .

Strong language?	□ Yes	□ No	□ Some
Explicit descriptions of sex?	□ Yes	□ No	□ Some
Violence? (Westerns and Mysteries			□ Some blence.)

Check the format you prefer for . . .

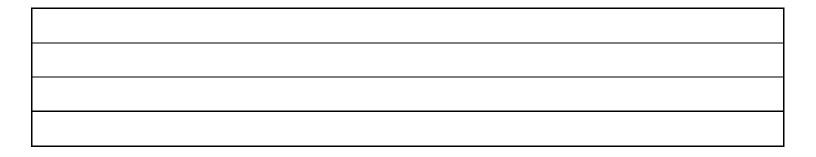
Talking Book Topics, a bi-monthly list of new recorded books

- □ Large Print
- □ Audio

Braille Book Review, a bi-monthly list of new Braille books

- □ Large Print
- □ Braille

List your favorite authors



Check up to 10 of your favorite subjects

Fiction

Adventure (Bestsellers, Sea Stories, Spy Stories)	
Christian Fiction	
□ Family (□ Modern, □ Traditional)	
☐ Historical Fiction: □ Foreign (country), □ U.S. (era)
□ Horror (□ Bestsellers)	
□ Literature (□ Classics, □ Modern, □ Folklore/Mythology)	
Modern Fiction	、
□ Mystery (□ Bestsellers, □ Historical, □ Legal Thriller, □ Detective	
□ Romance (□ Bestsellers, □ Historical, □ Modern, □ Traditiona	1 1)
□ Science Fiction (□ Bestsellers, □ Fantasy)	
□ War Stories	
Westerns Non-Fiction	
Adventure	
□ Art/Architecture	
\Box Biographies (\Box Bestsellers, \Box Celebrity, \Box Historical, \Box Politic	al)
\square Business	aiy
□ Careers	
True Crime Stories	
Social Issues	
Ethnic (Specify	_)
□ Disabilities	
Health (Specify	_)
☐ History: □ Foreign (country), □ U.S. (era	_)
Sports (Specify	_)
	、
Religion (Specify Religion (Specify)
Psychology	
□ Plays	
Poetry Music (Books about music: specify)	١
Music (Books about music: specify	/
□ Science (Specify □ Travel: □ U.S., □ Foreign (country	/ ``
□ War (Specify	// \
□ Other	/

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