



NEWPORT BEACH PUBLIC LIBRARY

Homebound Delivery Service Customer Application

Name: _____

Address: _____

Phone: _____ Date of Birth: _____ ☐ Male _____ ☐ Female _____

Emergency Contact Person: _____

E-Mail Address: _____

Reason for Homebound Delivery Services: _____

Length of Time Services Needed: _____

Best Day of the Week & Time for Delivery: _____

Special Needs: _____

FOR STAFF USE ONLY:

Instructions: _____

Volunteer Assigned: _____



NEWPORT BEACH PUBLIC LIBRARY

Homebound Delivery Service Reading Preferences

Customer Name _____

Reading Preferences (please check all that apply):

1. Do you prefer **Fiction** stories or **Non-fiction**?
- | | |
|---|---|
| <input type="radio"/> Classic Literature | <input type="radio"/> Adventure |
| <input type="radio"/> Fantasy | <input type="radio"/> Animals |
| <input type="radio"/> Mystery/Thriller | <input type="radio"/> Arts |
| <input type="radio"/> Romance | <input type="radio"/> Biography |
| <input type="radio"/> Science Fiction | <input type="radio"/> Business |
| <input type="radio"/> Western | <input type="radio"/> History |
| <input type="radio"/> Other (please specify): _____ | <input type="radio"/> Sports |
| _____ | <input type="radio"/> Travel |
| | <input type="radio"/> Other (please specify): _____ |
| | _____ |

2. Which formats do you prefer?

- Format:** ☐ Print (Physical) ☐ Audiobook
- Books:** ☐ Hard Cover ☐ Paperback ☐ Large Print
- Audio Books:** ☐ Compact Disc
- Video:** ☐ DVD ☐ Blu-ray

3. Describe the kind of book you enjoy reading: _____

4. Who are your favorite authors? _____

5. What are some titles of books you've enjoyed reading? _____

6. Do you like to re-read books that you really enjoyed? ☐ Yes ☐ No

7. Do you have Internet access? ☐ Yes ☐ No

Would you like information on free eBooks, eAudiobooks or
movie streaming services? ☐ Yes ☐ No

Newport Beach Public Library's Homebound Delivery service
Homebound Customer's Release Form

By my signature below, I hereby agree to hold harmless and release the City of Newport beach, its officers, agents, employees, and representatives from any loss, liability, claim, suit or judgement that may arise out of or in conjunction with the Library Homebound Delivery Service.

I understand that the Library staff will select materials for my use, check the materials out to me for a four-week loan period and that the Library will arrange to have a volunteer deliver the materials to my home on a scheduled basis.

Further, I understand that the volunteer assigned will be available only for scheduled visits to discuss reading selections and delivery of books. They will not provide assistance with activities of daily living, or advise on financial or personal matters.

I understand that the program is supervised by the Library staff and that any problems or conflicts with the volunteer are to be reported to staff. I also understand that I may become ineligible for this program if I do not abide by the guidelines set forth.

Homebound Customer Signature

Date