Home Library Delivery Service

You have expressed an interest in the City of Bunbury Home Library Service. Please complete this form providing us with information regarding your preferences; this will assist us in selecting items on your behalf.

Please indicate below the type of books you enjoy reading and the number of items you would like. You are entitled to borrow up to **12 items** per calendar month.

<table>
<thead>
<tr>
<th>Type To Be Selected</th>
<th>Number of Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-fiction Books</td>
<td></td>
</tr>
<tr>
<td>Fiction Books</td>
<td></td>
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<tr>
<td>Talking Books on CD</td>
<td></td>
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<tr>
<td>Talking Books on MP3</td>
<td></td>
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<tr>
<td>Magazines (limited selection only)</td>
<td></td>
</tr>
<tr>
<td>Music CD’s (limited selection only)</td>
<td></td>
</tr>
<tr>
<td>DVD’s (limited selection only)</td>
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</tr>
<tr>
<td>Jigsaws</td>
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</tbody>
</table>

Would you prefer regular or large print books?
- [ ] Large Print
- [ ] Regular Print
- [ ] Does not matter

Please let us know your subject interests by ticking below:

<table>
<thead>
<tr>
<th>Fiction</th>
<th>Non-Fiction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adventure</td>
<td>Animals / Pets</td>
</tr>
<tr>
<td>Australiana</td>
<td>Biographies</td>
</tr>
<tr>
<td>Crime &amp; Mystery</td>
<td>Cookery</td>
</tr>
<tr>
<td>Family Sagas</td>
<td>Crafts / Hobbies / Arts / Painting</td>
</tr>
<tr>
<td>Fantasy &amp; Mythology</td>
<td>Gardening</td>
</tr>
<tr>
<td>Historical</td>
<td>Health and Welfare</td>
</tr>
<tr>
<td>Humorous</td>
<td>History</td>
</tr>
<tr>
<td>Romance</td>
<td>Poetry</td>
</tr>
<tr>
<td>Science Fiction</td>
<td>Religion</td>
</tr>
<tr>
<td>Sea / Naval Stories</td>
<td>Sport</td>
</tr>
<tr>
<td>Short Stories</td>
<td>Travel / Geography</td>
</tr>
<tr>
<td>Thrillers</td>
<td>Any others <em>(please specify)</em>...</td>
</tr>
<tr>
<td>War Stories</td>
<td></td>
</tr>
<tr>
<td>Westerns</td>
<td></td>
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</tbody>
</table>
### Home Library Delivery Service

**Magazines**
- House and Garden
- Time
- Australian Woman’s Weekly
- National Geographic
- Good reading Magazine
- Australian Artist
- Home Beautiful
- Australian Photography
- Gardening Australia
- Inside History
- Caravan and Motorhome
- Wheels
- Australian Handyman
- Taste
- Popular Science

**CD’s**
- Country
- Pop
- Easy Listening / Relaxation
- Jazz
- Classical
- International
- Other -

**DVD’s**
- Action
- Romance
- TV series
- Thriller
- Comedy
- Documentaries
- Classics

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**Please tell us about any particular authors that you like or books you have enjoyed:**

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________
Home Library Delivery Service

DECLARATION

- I am interested in having library items delivered to my residence and hereby apply for membership of the City of Bunbury Libraries and agree to abide by the rules of the Library.
- The items in my possession are my responsibility and should any loss or damage occur I am prepared to cover this cost.
- The items will not go out of my possession. They will be delivered and collected only by a library volunteer or COB staff member.
- I am unable to get into the Bunbury City Library or Withers Community Library and there is no one else who can collect items on my behalf.
- I have provided a doctor’s certificate or care facility manager’s letter that verifies my need for this service.
- I am aware that the City Of Bunbury Library will keep a record of what I have borrowed to assist in providing me with the best service possible.

I am unable to visit the public library due to injury, illness or disability and would like to receive the home library delivery service. I certify that the above information on this form is correct and accept responsibility for those materials borrowed on the library card issued from this application. I accept permission for City of Bunbury Library personnel to use my library card to checkout materials for me.

Signed

Date

Applicant Details:

Name

Date of birth

Address

Telephone Number

Alternative Contact Person:

Name

Address

Telephone Number

Relationship to Applicant

Please return form and doctor’s certificate or care facility manager’s letter to:

The Manager, City of Bunbury Library, PO Box 1981, Bunbury, WA 6230