



**OREGON PUBLIC LIBRARY**  
**HOMEBOUND SERVICES APPLICATION**

Library Card Number: \_\_\_\_\_

Full Legal Name: \_\_\_\_\_  
First Middle Initial Last

Residential Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State ZIP County

Date of Birth (MM/DD/YYYY): \_\_\_\_\_  Male  Female

Preferred Communication:  Email  Phone

Phone Number \_\_\_\_\_ Best time of day to call  AM  PM

Email Address: \_\_\_\_\_

**Read below and sign:**

I am applying to participate in Homebound Services at the Oregon Public Library (OPL). I give OPL staff permission to use my library card to check out materials on my behalf.

I agree that a record of the library materials I check out and my reading interests may be kept, with the understanding that my reading history and interests will be kept confidential.

I declare that I am homebound and physically unable to go to the Oregon Public Library due to health, mobility, advanced age, visual impairment, blindness, physical disability, or permanent or temporary incapacity.

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

PLEASE CHOOSE ONE OF THE FOLLOWING OPTIONS:

- Please do not select items for me. Send only the titles I request
- Please select items for me from the Reader Interest Form (on page 3). I understand that I may also request specific titles whenever I wish.

AGE GROUP OF READING MATERIAL (check one or more)

- Adult
- Young Adult
- Juvenile

PREFERRED FORMAT (check all that apply)

- Any items. I don't have a preference.
- Only Audiobooks
- Only Large Print
- Only Paperback

I do NOT want books that contain:

- Strong Language
- Sex
- Violence

My Favorite Authors and Books:

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# Reader Interest Form

Select your favorite genres

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**Adventure**

- Spy/Military
- Sea Adventures
- Survival

**Best Seller**

**Christian**

- Adventure
- Mystery
- Romance

**Classics**

**Fantasy**

- High/Epic
- Humorous
- Myth/Legends
- Mythical Creatures
- Urban (Modern)

**Historical Fiction**

Time Period:

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**Horror**

- Paranormal
- Slasher/Gore
- Vampire
- Zombie

**Mystery**

- Classic
- English Detective
- Cozy
- Legal
- Police Procedural
- Private Investigator
- Suspense
- Thriller

**Romance**

- African-American
- Amish
- Contemporary
- Historical
- Paranormal

**Science Fiction**

- Aliens
- Alternative History
- Alternative Worlds
- Dystopian/Utopian
- Science Fantasy
- Space Opera

Steam Punk

- Technology
- Time Travel

**Westerns**

**Nonfiction**

- Animals
- Art
- Bestseller
- Biography
- Cookbook
- Crafts
- Health
- History
- Humor
- Memoir
- Military
- Parapsychology/Occultism
- Personal Finance
- Philosophy
- Poetry
- Politics
- Religion
- Self-Improvement
- Science
- True Crime



**OREGON PUBLIC LIBRARY**  
***CERTIFICATE OF ELIGIBILITY FOR HOMEBOUND SERVICES***

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To be completed by a medical professional or other professional,  
other than the applicant's immediate family.

I certify that \_\_\_\_\_

Homebound Service Applicant's Name

is confined to his/her residence either temporarily or permanently, due to  
age, illness, disability, or other mobility problems.

Select one:

- Applicant requires continuing homebound service.
- Applicant requires temporary homebound service until \_\_\_\_\_.  
Date

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

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title and Occupation

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number Email