



## HOME DELIVERY REGISTRATION

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone # \_\_\_\_\_  
Email \_\_\_\_\_  
Birth date \_\_\_\_\_

### SECONDARY CONTACT

Phone # \_\_\_\_\_  
Email \_\_\_\_\_  
Relationship \_\_\_\_\_

Can this contact receive information about your account? Y / N

Do you have internet access? Y / N

### LIBRARY CARD

- ☐ I already have a library card. Card Number: 22812
- ☐ I do not have a library card.

### ENROLLMENT

I am a resident of the Goshen Central School District and unable to visit the Library either temporarily or permanently due to disability, illness, loss of mobility or am a caregiver for such a person.

I am registering for the homebound delivery service on a

- ☐ Long-term basis
- ☐ Short-term basis: \_\_\_\_ months

Please choose one of the following enrollment options:

- ☐ **Holds only delivery** – I would like to receive only materials I have placed on hold or requested
- ☐ **Recommended reads delivery** – I would like to receive materials staff select based on my Interest Profile and reading history. I understand that by selecting this option, I agree to activate a reading history record within my account.

How many items would you like per month? \_\_\_\_\_

I have read and agree to the terms of service. Sign here \_\_\_\_\_

## PREFERENCE PROFILE

### FORMATS REQUESTED (CHECK ALL THAT APPLY):

- |                                              |                                            |                                     |
|----------------------------------------------|--------------------------------------------|-------------------------------------|
| <input type="checkbox"/> Regular print books | <input type="checkbox"/> Large print books | <input type="checkbox"/> Audiobooks |
| <input type="checkbox"/> Music CDs           | <input type="checkbox"/> DVDs              | <input type="checkbox"/> Magazines  |
| <input type="checkbox"/> Puzzles             |                                            |                                     |

### READING PREFERENCES – FICTION (CHECK ALL THAT APPLY)

- |                                          |                                             |                                             |
|------------------------------------------|---------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Classics        | <input type="checkbox"/> Fantasy            | <input type="checkbox"/> Fiction            |
| <input type="checkbox"/> Graphic Novels  | <input type="checkbox"/> Historical Fiction | <input type="checkbox"/> Inspirational      |
| <input type="checkbox"/> Mystery         | <input type="checkbox"/> Romance (spicy)    | <input type="checkbox"/> Romance (sweet)    |
| <input type="checkbox"/> Science Fiction | <input type="checkbox"/> Short Stories      | <input type="checkbox"/> Suspense/Thrillers |
| <input type="checkbox"/> Other           |                                             |                                             |

Favorite authors

### READING PREFERENCES – NON-FICTION (CHECK ALL THAT APPLY)

- |                                        |                                                 |                                           |
|----------------------------------------|-------------------------------------------------|-------------------------------------------|
| <input type="checkbox"/> Arts & crafts | <input type="checkbox"/> Biography & memoir     | <input type="checkbox"/> Cooking          |
| <input type="checkbox"/> Gardening     | <input type="checkbox"/> Health                 | <input type="checkbox"/> History          |
| <input type="checkbox"/> Poetry        | <input type="checkbox"/> Psychology & self-help | <input type="checkbox"/> Science & nature |
| <input type="checkbox"/> Sports        | <input type="checkbox"/> Travel                 | <input type="checkbox"/> True Crime       |
| <input type="checkbox"/> Other         |                                                 |                                           |

### MOVIE PREFERENCES (CHECK ALL THAT APPLY)

- |                                            |                                      |                                  |
|--------------------------------------------|--------------------------------------|----------------------------------|
| <input type="checkbox"/> Comedy            | <input type="checkbox"/> Documentary | <input type="checkbox"/> Drama   |
| <input type="checkbox"/> Historical/period | <input type="checkbox"/> Musical     | <input type="checkbox"/> Romance |
| <input type="checkbox"/> Thriller          | <input type="checkbox"/> TV shows    | <input type="checkbox"/> War     |
| <input type="checkbox"/> Western           | <input type="checkbox"/> Other       |                                  |

Favorite actors:

### MUSIC PREFERENCES

IS THERE ANYTHING ELSE YOU WOULD LIKE US TO KNOW?

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## HOME DELIVERY SERVICE

Home Delivery Service is a free service to ensure access to library materials to those who cannot come to the library.

### WHO IS ELIGIBLE?

Individuals who reside within the Goshen Central School District and are unable to visit the library due to disability, illness, loss of mobility or are a caregiver for a person with such limitations. Service can be provided permanently or on a short-term basis.

### HOW DOES IT WORK?

There are two types of service for homebound patrons: **Recommended Reads** where staff select books and other materials based on your interests and **Holds Only** where you place requests through the library catalog. Materials will be delivered/picked up on a monthly basis.

### WHAT ARE THE TERMS?

Patrons are responsible for the care of all materials. While there are not overdue fines, patrons are responsible for the cost of lost or damaged materials.

GPLHS reserves the right to change the terms, delivery process or enrollment status at any time.

### HOW DO I ENROLL?

Fill out the Home Delivery Service Registration and Preference Profile and return it to the Goshen Public Library & Historical Society, 366 Main St. Goshen, NY 10924. If you have any questions, call us at (845)294-6606 ext. 106 or email us at [gosref@rcls.org](mailto:gosref@rcls.org).