

APPENDIX A



Albany Public Library

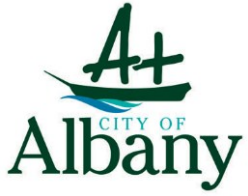
ALBANY PUBLIC LIBRARY

HOME LIBRARY SERVICE APPLICATION FORM

Patron

Date Joined.....

Transport	Selection	Service	Run
Car	N/A	N/A	N/A
Taxi / Bus	Assist	Collect from library	N/A
Family/friends: Name..... Address..... Phone.....	Assist	Collect from library	N/A
Silver Chain or other carer assistance	Assist	Collect from library	N/A
Housebound due to			
Referral from agency/doctor			
Membership card No.			
New enrolment details Name..... Address..... Phone No.....		Delivery	BETH L/LG SPE EMU
Second contact/Next of kin: Name..... Address..... Phone No.....			



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Recommendation:

Signed: _____
(Authorised HLS Officer)

Dated: _____