



ELIGIBLE FOR Mail-A-Book?

You must meet one of the following requirements to be eligible for Mail-A-Book:

Please mark the requirements that apply:

1. Physical limitation (temporary long term)
2. Homebound /lack of transportation
(temporary long term)
3. Residence is 15 miles or more from the nearest public library.

Name: _____
Last First Middle Initial

Local Address: _____
Number / Street
City State ZIP Code

Telephone: () _____ **home** () _____ **work**

City _____ **Village** _____ **Township** _____ (check one)

City/Village/Township name _____

County _____

Note: We must have this information in order to process your card. If you do not live in a city or village, make sure to list your township (the town hall where you vote).

Birth date: _____ (needed for statistical purposes)

E-mail: _____

Alternate address: (if the address you used above is seasonal)

I accept responsibility for all materials borrowed on my card, and I agree to give immediate notice of card loss or of a change of name or address.

Signature: _____ **Date:** _____

Parents of minor children accept responsibility for their children's use of library materials and equipment, including the library's Internet service.

Parent/Guardian responsibility (if applicant is under the age of 18):

Parent/Guardian name: _____

Parent/Guardian signature: _____

Please complete this application and return to Northern Waters Library Service. 4/20/21

TO: *Mail-A-Book Application Processing*
Northern Waters Library Service
3200 East Lakeshore Drive
Ashland, WI 54806
