



Plainfield - Guilford Township Public Library
Homebound Delivery Services

Confidential Patron Profile

Date _____ Year-Round Service _____ Winter Only _____

Name _____ Age _____ Sex _____

Address _____ Phone _____

Directions to your residence _____

_____ Birth Month _____

Referred by _____ Relationship _____

Address _____ Phone _____

* Is this a person we may call in an emergency? Yes _____ No _____
If no, please list a name and number we can call in case of an emergency.

* Do you presently have a library card? Yes _____ No _____
If yes, your card needs to be turned in with this form.

* Have you had a library card in the past? Yes _____ No _____
If yes, was the name or address different? Yes _____ No _____
Name _____ Address _____

* Time preference for delivery? _____ Where would you prefer
delivery? Front door ___ side door ___ Back door ___ Other _____

* Would you prefer us to: Knock _____ Ring the bell _____ Leave inside the
door _____ Other _____

Over →

Reading Preferences

Do you have any special physical challenges? Wheelchair bound _____
Blind or poor eyesight _____ Deaf _____ Are heavy books a problem _____

Would you like large print _____ Regular print _____ Books on tape _____
Books on CD _____ Magazines _____ Names/subjects of Magazines _____

Would you like to receive music? _____ CD _____ Tape _____ Country _____
Classical _____ Easy listening _____ Classical Rock _____ Big Band _____
Folk _____ Reggae _____ Blues _____ Gospel _____ Other _____

Please list any areas in which you definitely have no interest _____

Please list any subject matters that may be offensive to you _____

Do you have any objection to sex _____ language _____ violence _____?

What type of reading do you enjoy?

Fiction:

Novels: Contemporary _____ Historical _____

Romance: Harlequin _____ Inspirational _____ Other _____

Mystery: Detective _____ Espionage _____ Murder _____

Western: Historical _____ Contemporary _____

Science Fiction: Fantasy _____

Non-Fiction:

Arts and Crafts _____ Biography _____ History _____ Humor _____

Nature _____ Politics _____ Religion _____ Travel _____ Other _____

List your favorite authors and any other information you feel would be helpful
In selecting your materials: _____

After completing this form, please return it to:

Information Services Department
1120 Stafford Road
Plainfield, IN 46168

Phone:
838-3800



Where the journey begins!

Plainfield | Guilford Township
PUBLIC LIBRARY

Name _____ Please CIRCLE the authors that you would like to read!

ALBERT, Susan Wittig	CHILD, Lee	DeMILLE, Nelson	HARRIS, Charlaine
ARCHER, Jeffrey	CHAPMAN, Janet	DEVERAUX, Jude	HART, Carolyn
BALDACCI, David	CLANCY, Tom	DODD, Christina	HILLERMAN, Tony
BALOGH, Mary	CLARK, Carol Higgins	ENOCH, Suzanne	HOOPER, Kay
BEATON, M.C.	CLARK, Mary Higgins	EVANOVICH, Janet	HOWARD, Linda
BEVERLY, Jo	COBEN, Harlan	EVANS, Richard Paul	ILES, Greg
BINCHY, Maeve	COBLE, Colleen	FLUKE, Joanne	JOHANSEN, Iris
BRADFORD, Barbara Taylor	CONNELLY, Michael	FOLLETT, Ken	KARON, Jan
BRAND, Max	COOK, Robin	GABHART, Ann	KELLERMAN, Faye
BRAUN, Lillian Jackson	COONTS, Stephen	GARDNER, Lisa	KELLERMAN, Jonathan
BROWN, Dale	COPELAND, Lori	GARLOCK, Dorothy	KING, Stephen
BROWN, Dan	CORNWELL, Patricia	GARWOOD, Julie	KINGSBURY, Karen
BROWN, Rita Mae	COULTER, Catherine	GERRITSEN, Tess	KINGSOLIVER, Barbara
BROWN, Sandra	CUSSLER, Clive	GRAFTON, Sue	KLEYPAS, Lisa
BRUNSTETTER, Wanda E.	DAILEY, Janet	GRAHAM, Heather	KOONTZ, Dean
BURKE, James Lee	DAVIDSON, Diane Mott	GRIFFIN, W.E.B.	KRENTZ, Jayne Ann
CAMERON, Stella	DEAVER, Jeffrey	GRISHAM, John	LaHAYE, Tim
CARR, Robyn	DELINSKY, Barbara	HARPER, Karen	L'AMOUR, Louis



- | | | | |
|--------------------|---------------------------|----------------|-----------|
| LAURENS, Stephanie | OATES, Joyce Carol | THOMAS, Jodi | 3. _____ |
| LeCARRE, John | OKE, Janette | TURROW, Scott | 4. _____ |
| LEIGH, Lora | PALMER, Diana | WARNER, Kaki | 5. _____ |
| LESCROART, John | PALMER, Michael | WHITE, Karen | 6. _____ |
| LEWIS, Beverly | PARETSKY, Sara | WICK, Lori | 7. _____ |
| LINDSEY, Johanna | PATTERSON, James | WIGGS, Susan | 8. _____ |
| LOWELL, Elizabeth | PERRY, Anne | WOODS, Barbara | 9. _____ |
| LUDLUM, Robert | PETERSON, Tracie | WOODS, Sherryl | 10. _____ |
| MACOMBER, Debbie | PHILLIPS, Susan Elizabeth | WOODS, Stuart | 11. _____ |
| MALLERY, Susan | PICOULT, Jodi | | 12. _____ |
| MARTIN, Kat | RICE, Anne | | 13. _____ |
| MARTINI, Steve | RIVERS, Francine | | |
| McMURTRY, Larry | ROBARDS, Karen | | |
| MICHAELS, Fern | ROBB, J. D. | | |
| MILLER, Linda Lael | ROBERTS, Nora | | |
| MORRIS, Gilbert | ROSS, Ann B | | |
| MORRISON, Toni | SANFORD, John | | |
| MORSI, Pamela | SPARKS, Nicholas | | |
| MULLER, Marcia | STEEL, Danielle | | |

ADD YOUR OWN
AUTHORS

1. _____
2. _____

NAME _____
ADDRESS _____
CITY, STATE, Zip _____
PHONE NUMBER _____