



Smithtown Building: One North Country Road, Smithtown, NY 11787
Commack Building: 3 Indian Head Road, Commack, NY 11725
Kings Park Building: One Church Street, Kings Park, NY 11754
Nesconset Building: 148 Smithtown Boulevard, Nesconset, NY 11767

Name _____

MATERIAL PREFERENCE CHECKLIST

So that we can provide better service to you, please fill out this section completely.

Books:

_____ Large Print _____ Regular Print (Physically Disabled Only)

Please check the type of books or subjects you prefer, or write your reading interests in the space provided.

- | | |
|-----------------------------------|-----------------------------|
| _____ Adventure Stories | _____ History |
| _____ Animals | _____ Humor/Poetry |
| _____ Best Sellers | _____ Politics & Government |
| _____ Biographies | _____ Religion |
| _____ Classic Novels | _____ Romance |
| _____ Cooking | _____ Science Fiction |
| _____ Detective & Mystery Stories | _____ Short Stories |
| _____ Family Saga | _____ Sports |
| _____ Gothic Novels | _____ Spy Stories |
| _____ Health | _____ Travel |
| _____ Historical Fiction | _____ Westerns |

My other reading interests are:

Some of my favorite authors are:

TURN OVER →

Audio Visual:

Please check if you would like the following types of materials:

____ **Audio Books**

____ **Music CDs**

____ **DVDs**

____ **Blu-rays**

Please indicate your Music CD preferences

Please indicate your DVD or Blu-ray preferences



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Homebound Mail Service Agreement

This agreement must be signed annually to retain your homebound service. Please sign the agreement and return in the self-addressed stamped envelope.

Agreement:

I hereby declare that I am eligible for Homebound Mail Service in order to receive the Library's materials by mail. By signing this agreement, I acknowledge that I am unable to leave my residence in order to come into the Library due to a temporary or permanent disability and do not have anyone who can pick up and return the Library's materials. I agree to inform the Homebound Librarian if, or when, my disability status ends.

Signed: _____ Date: _____

*For questions, call the Library at (631) 360-2480,
and select the appropriate extension:*

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Commack Building ext. 397

Kings Park Building, ext. 497

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