

# MARYLAND STATE LIBRARY FOR THE BLIND AND PRINT DISABLED

#### APPLICATION FOR FREE LIBRARY SERVICE

The Maryland State Library for the Blind and Print Disabled in Baltimore provides library service to all eligible citizens of Maryland under the direction of the National Library Service for the Blind and Print Disabled of the Library of Congress and the Maryland State Library.

Maryland State Library for the Blind and Print Disabled 415 Park Avenue Baltimore, Maryland 21201

Void	ce TTY	
(410) 230 - 2426	4 (410)	333 - 8679
(800) $964 - 920$	9 (800)	934 - 2541

Fax (410) 333-2095

Web Page: <a href="www.lbph.maryland.gov">www.lbph.maryland.gov</a> Email: <a href="mailto:reference.desk@maryland.gov">reference.desk@maryland.gov</a>

OPAC (Online Public Access Catalog): https://mdlbpd.klas.com

For library use: Patron ID
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Please complete this application and send it to the Maryland State Library <b>t</b>	for the
Blind and Print Disabled by mail, fax, or email.	

DATE:			
NAME:	FIRST		MIDDLE INITIAL
ADDRESS: STREET			
CITY	ST	ATE	ZIP Code
TELEPHONE: HOME		_ OTHE	₹
EMAIL ADDRESS:			
DATE OF BIRTH:		SE	EX:[]M []F
ALTERNATE CONTA	CT PERSON:		
ALTERNATE CONTAC	CT PHONE:		
			ent is given to veterans. Please he United States Military.
	<b>J</b> .		reading standard printed substantiated on the following
[ ] Blindness	[ ] Visual disability	[]Phys	ical disability
[ ] Reading disability	[ ] Deaf-blindness		
Required for applica	nts who are minors	(under 18 y	years old):
receiving services a	• •	/ID LBPD. I	dge and consent to my child will return any equipment and
Parent/Guardian signa	iture:		· · · · · · · · · · · · · · · · · · ·

#### **ELIGIBILITY CRITERIA FOR LOAN OF LIBRARY MATERIALS**

The following persons are eligible for loan service:

- 1. Those people whose visual acuity, as determined by a competent authority, is 20/200 or less in the better eye with correcting lenses or whose widest diameter of visual field subtends an angular distance no greater than 20 degrees.
- 2. Those with physical disabilities are eligible as follows:
- (a) Persons whose visual impairment, with correction and regardless of optical measurement, is certified by a competent authority as preventing the reading of standard printed material.
- (b) Persons certified by a competent authority as unable to read or unable to use standard printed material as a result of physical limitations.
- (c) Persons certified by a competent authority as having a reading disability resulting from organic dysfunction and of sufficient severity to prevent their reading printed material in a conventional manner.

#### **CERTIFYING AUTHORITY:**

 Eligibility must be certified by one of the following: doctor of medicine, doctor of osteopathy, ophthalmologist, optometrist, psychologist, registered nurse, therapist, and professional staff of hospitals, institutions, and public or welfare agencies (such as an educator, a social worker, case worker, counselor, rehabilitation teacher, certified reading specialist, school psychologist, superintendent, or librarian).

#### TO BE COMPLETED BY CERTIFYING AUTHORITY (AS DEFINED ABOVE)

I certify that the named applicant requesting library service is unable to read or use regular printed material for the reason indicated on this form.

NAME: TITLE/OCCUPATION: AGENCY: ADDRESS:			
TELEPHONE: EMAIL ADDRESS:			
CERTIFIER'S SIGNATURE	<del></del> <u></u>		

### **MATERIALS AND EQUIPMENT**

<b>Materials:</b> Please select the format of your reading materials. Check all that you would like.
[] Audio books and/or magazines (Digital talking book player is supplied by the library)
[] Hard copy braille books and/or magazines
[] Electronic braille books and/or magazines (Braille eReader is supplied by the library)
[] Large print books
[] BARD (Braille and Audio Reading Download)
Email address (required for BARD):
If you checked only BARD, do you want a digital talking book player from the library?
[] Yes, send me a digital talking book player.
[] No, I do not need a digital talking book player. I will use my own device(s).
Accessories:
[] USB flash drive adapter (used to connect a personal flash drive to the player)
[] Digital talking book cartridge cable (used to connect a personal blank cartridge to a computer for downloading books from BARD)
[] Headphones
[] Remote control
[] High volume player and headphones (issued solely for use by readers with profound hearing loss; ask for a separate application)
Talking Book Topics is a bimonthly publication that lists newly available audio books, available online at <a href="https://www.loc.gov/nls/tbt">www.loc.gov/nls/tbt</a>
Would you like to subscribe to an audio version of this publication?
[] Yes [] No

## **Reading Preferences**

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Please indicate your readi	ng preferences by checking	the categories below:
[] Adventure	[] Historical Fiction	[] Religious Inspiration
[] Animal Stories	[] History (World)	[] Romance
[] Bible Stories	[] History (United States)	[] Science
[] Biography	[] Horror	[] Science Fiction
[] Black/African American Interest	[] Humor	[] Short Story Collections
[] Business & Economics	[] Literature - Poetry	[] Sports & Recreation
[] Christian Fiction	[] Maryland Interest	[] Suspense
[] Classics	[] Medicine & Health	[] Technology
[] Cooking & Housekeeping	[ ] Music and Dance (Nonfiction)	[] Travel & Geography
[] Family Saga	[] Mystery & Detective	[] War Stories
[] Fantasy	[] Politics & Government	[] Westerns
[] Fine Arts & Architecture	[] Popular Psychology	[] Young Adult
Other preferences or fav	orite authors:	
For children's books, ple	ease give the reading/grad	e level:
		atings (Please note that ratings some may not be to others):
[] Strong Language		
	en many popular authors in	select Westerns, War Stories, those categories will be excluded
	, -	nd also select Romance above, xcluded from the books you

What type	of books o	lo you pref	er?				
[] Both ficti	on and non	fiction	[] Fiction o	only [	] Nonfic	ction only	
(Patrons	may also p		d for me in the sts and are ear.)				
may be	requested b	y calling or	Send only the emailing the using the Ta	e library, c	ordering	online using	•
How often	would you	like to rec	eive books	?			
[] Daily	[]W	eekly	[] Every ot	her week			
_	(You will re		ronic braill ook cartridg		_		e sent at e requested
[]5	[] 10	[] 15	[]20	[]25	[] N//	4	
How many time?	hard copy	braille or l	arge print l	ooks wo	ould you	like to be	sent at one
[]1	[]2	[]3	[] N/A				
Other Serv	<u>vices</u>						
			fered by th ds of news				e Blind that the phone.
Would you	like to be re	egistered for	NEWSLINI	E®? []`	Yes	[] No	
		_	vith materia er formats.		lio (simu	ulated voic	e), audio +
Would you	like a prom	o code for f	ree access t	o Booksh	are?	[] Yes	[] No
Email addr	ess (require	۳۹)٠					

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eceive information fro	om the libra	ry on the fo	ollowing topics:		
[] Accessible Technology Training and Group Meetings					
[] Adult Events and Services					
lege Textbooks					
ts/Resources from Pa	rtner Organiz	zations			
ar about the Maryland ok up to three)	d State Libr	ary for the	Blind and Print		
rs/Defense Health Age	ency	[] Other H	ealth Care Professional		
nabilitation Center	[] Friend/F	amily	[] Public Library		
[] Consumer/Support	Group	[] TV Ad	[] Radio Ad		
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	chnology Training and nd Services lege Textbooks ts/Resources from Particle (ar about the Marylane) rs/Defense Health Age (ar abilitation Center) [] Consumer/Support (ase specify) Media (Please specify) lease specify)	chnology Training and Group Meet and Services lege Textbooks ts/Resources from Partner Organiz ar about the Maryland State Libre k up to three) rs/Defense Health Agency nabilitation Center [] Friend/F [] Consumer/Support Group use specify) Media (Please specify) lease specify)	lege Textbooks  ts/Resources from Partner Organizations  ar about the Maryland State Library for the sk up to three)  rs/Defense Health Agency [] Other Heabilitation Center [] Friend/Family  [] Consumer/Support Group [] TV Aduse specify)  Media (Please specify)  lease specify)		

Note: If you filled out this application for a prospective patron, please review the selected preferences with that individual. We wish to provide our patrons with the reading materials that best meet their interests.

MAIL THIS COMPLETED APPLICATION TO THE ADDRESS BELOW. FOLD ALONG THE LINE AND STAPLE OR TAPE CLOSED.
FREE MATTER FOR THE BLIND AND HANDICAPPED

MARYLAND STATE LIBRARY FOR THE BLIND AND PRINT DISABLED 415 PARK AVENUE BALTIMORE, MARYLAND 21201-3603