

Dr. Samuel L. Bossard Memorial Library  
7 Spruce Street Gallipolis, Ohio 45631  
446-7323 / 446-READ  
Homebound Services – Supervisor Jack Mowery

**Application for Homebound Services**

Name of Person \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Emergency Contact phone number \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

\*Applicant's signature on form authorizes Library staff to notify emergency contact, if needed.

**Please circle reason for need of Homebound Services:**

- a. disabled;      b. lack of transportation;      c. homebound elderly

Library materials needed \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Referred by \_\_\_\_\_ Date Received \_\_\_\_\_

\_\_\_\_\_

Staff use:      Contacted \_\_\_\_\_

Updated 7-2014      Route Assigned \_\_\_\_\_