



Pembrokeshire Library Service

Application Form for the Library At Home Service

Are you already a member of the Library Service? Yes No

If yes, which Library are you registered with (if known)

.....

Library Card Number.....

Your Details

Name

Address

.....

.....

.....

Postcode

Telephone Mobile

Email address

How did you hear about the 'Library At Home' Service? (Please tick)

Word of mouth	
Council Website	
Mobile Driver	
Newspaper	
Other, please specify	

Which of the following describes your situation? (Please tick yes or no to every question in the grid)

	Yes	No
I am unable to use the Friends or Family Service		
I am unable to leave my home due to physical/health reasons		
I am unable to travel to the library, due to not having a car, or access to public transport		
I am unable to carry materials to and from the library		
I am culturally isolated at home, due to language, social or religious reasons		
I am a Carer, unable to leave the home except for essential matters		

Declaration: I confirm that I am unable to use any of Pembrokeshire’s libraries, or any of the Mobile Library stops, and therefore require a library at home service.

Signature: **Date:**

Office Use Only

Eligible for the service? Yes No Date informed

Membership Form Completed? Yes No Card Number

Reading Profile Completed? Date By whom

Route Assigned to Date of first visit

Please post to:

Library At Home Service, Unit 9, Thornton Business Park, Milford Haven, SA73 2RY