



MONTANA TALKING
BOOK LIBRARY
MONTANA STATE LIBRARY

MONTANA TALKING BOOK LIBRARY
PO Box 201800, Helena MT 59620-1800

Phone: 406-444-2064
Toll Free in Montana: 1-800-332-3400
Fax: 406-444-0266

Website: msl.mt.gov/tbl
E-mail: mtbl@mt.gov

APPLICATION FOR FREE LIBRARY SERVICE - INDIVIDUAL
(Please Print or Type)

PATRON NAME: _____
(Last) (First) (Initial)

ADDRESS: _____
(Street or PO Box)

CITY: _____ **COUNTY:** _____ **ZIP:** _____

DAYTIME PHONE #: _____ **BIRTH DATE:** ___/___/___ Female Male
(MM/DD/YY)

PATRON EMAIL: _____

ALTERNATE CONTACT: Name of a person to contact if you cannot be reached for an extended period. (If the applicant is a student, the contact must be the student's parent or guardian.)

NAME: _____ **DAYTIME PHONE:** _____

ADDRESS: _____
(Street or P.O. Box) (City) (State) (Zip)

Relationship to patron: _____ **EMAIL:** _____

NAME & PHONE NUMBER OF PERSON FILLING OUT THIS APPLICATION IF OTHER THAN ABOVE:

CONFIDENTIALITY STATEMENT: All library records are confidential pursuant to Montana Code annotated 22-1-1103.

VETERANS:

Please check if you have been honorably discharged from the U.S. Armed Forces.

Applications for Institutions (public libraries, independent & assisted living facilities, nursing & retirement homes, hospitals and schools) are available on our web site or contact us directly.

BLINDNESS: Visual acuity of 20/200 or less in the better eye with correcting

glasses, or the widest diameter of visual field subtending an angular distance no greater than 20 degrees.

- LOW VISION/VISUAL HANDICAP:** Inability to read standard printed material without aids or devices other than regular glasses.
- PHYSICAL HANDICAP:** Inability to read or use standard printed material due to physical limitations, e.g. paralysis, missing arms or hands, extreme weakness.

IN THE ABOVE CASES, you must be certified by a “competent authority”, defined as a Doctor of Medicine (M.D.), Doctor of Osteopathy (D.O.), Ophthalmologist, Optometrist, Registered Nurse, Therapist or professional staff of hospitals, institutions, public or private welfare agency (e.g. Social Worker, Counselor, Rehabilitation Teacher or Superintendent), or by any person whose competence under specific circumstances is acceptable to the Library of Congress-National Library Service.

READING DISABILITY: Is defined as an organic dysfunction of sufficient severity as to prevent reading printed material in normal manner.

Certification of a reading disability specifically requires certification by a Doctor of Medicine (M.D.) or a Doctor of Osteopathy (D.O.), who may consult with colleagues in associated disciplines

****TO BE SIGNED AND COMPLETED BY CERTIFYING AUTHORITY:**

I certify that the named applicant requesting library service is unable to read or use standard printed materials for the reasons noted above:

Signature _____ Date _____
Certifying Authority

Please print or type:

Name _____

Title/Occupation _____ Organization _____

Street address _____ Telephone (____) _____

City _____ State _____ ZIP _____

EQUIPMENT, ACCESSORIES, AND OTHER SERVICES:

Please check the box provided:

Choose One:

- Digital Standard Machine** for books recorded on Digital cartridge.
- Digital Advanced Machine** (Additional navigation buttons) for books recorded on Digital cartridge.

Also Available:

- Cassette Standard Machine:** This machine is being phased out but is still appropriate for persons interested in Montana History or with wide ranging reading interests.

Headphones:

- Headphone** (For use in shared environments or where speakers are not permitted)

Do you also have a hearing impairment? If yes, indicate the degree of hearing loss.

- Moderate**—some difficulty hearing and understanding speech.
- Profound**—cannot hear or understand speech.

- Amplifier** (Issued solely for use by readers with profound hearing loss. A separate application requiring certification by an audiologist is required.)

RETURN OF EQUIPMENT: Equipment and accessories are supplied to eligible persons on extended loan. **If this equipment is not being used in conjunction with recorded reading materials provided by the Library of Congress and its cooperating libraries, it must be returned to the Montana Talking Book Library.**

OTHER SERVICES:

- Audio Magazines**
- BARD – downloadable audio and braille books** (high speed Internet & email address required)
- Braille Print books and magazines**
- Children’s Braille Print & Twin Vision books**
- Descriptive Videos/ VHS** (requires own VCR)
- National Library Service (NLS) Music Services**
- NEWSLINE** (telephone newspaper service)
- Online Catalog** (WEBOPAC), (email address required)

TEXTBOOKS: Contact Learning Ally, 1-800-221-4792,
<http://www.learningally.org>

READING PREFERENCES:

Check A or B:

A. Send only the specific titles I will request. Do NOT select books for me.

B. I wish to have books selected for me.

NOTE: If you wish to have books selected for you, the library needs information about your reading interests. Please check the types of books or subjects you prefer:

Do you have a Preference for Fiction or Nonfiction?

- | | | |
|--|--|--|
| <input type="checkbox"/> Adventure - Fiction | <input type="checkbox"/> Folklore/Fairy Tales | <input type="checkbox"/> Psychology & self-help |
| <input type="checkbox"/> Adventure – True Life | <input type="checkbox"/> Gardening | <input type="checkbox"/> Religion |
| <input type="checkbox"/> Animals and wildlife | <input type="checkbox"/> General Fiction | <input type="checkbox"/> Religious Fiction |
| <input type="checkbox"/> Bestsellers | <input type="checkbox"/> Government, Politics | <input type="checkbox"/> Romance |
| <input type="checkbox"/> Bible & Bible Stories | <input type="checkbox"/> Health & Medicine | <input type="checkbox"/> Historical Romance |
| <input type="checkbox"/> Biographies | <input type="checkbox"/> Historical fiction | <input type="checkbox"/> Science & Nature |
| <input type="checkbox"/> Business & economics | <input type="checkbox"/> History - Ancient | <input type="checkbox"/> Science fiction |
| <input type="checkbox"/> Career & job training | <input type="checkbox"/> History - U.S. | <input type="checkbox"/> Aging & Retirement |
| <input type="checkbox"/> Children's fiction:
grade level _____ | <input type="checkbox"/> History - World | <input type="checkbox"/> Short Fiction |
| <input type="checkbox"/> Children's nonfiction:
grade level _____ | <input type="checkbox"/> Humor | <input type="checkbox"/> Sociology and Social
Customs |
| <input type="checkbox"/> Classic novels | <input type="checkbox"/> Montana History | <input type="checkbox"/> Sports: _____ |
| <input type="checkbox"/> Computers & technology | <input type="checkbox"/> Montana Interests | <input type="checkbox"/> Spy stories |
| <input type="checkbox"/> Cooking & homemaking | <input type="checkbox"/> Montana Authors | <input type="checkbox"/> Stage & screen |
| <input type="checkbox"/> Crafts/Hobbies | <input type="checkbox"/> Mystery & detective | <input type="checkbox"/> Suspense stories |
| <input type="checkbox"/> Diet and Nutrition | <input type="checkbox"/> Native American | <input type="checkbox"/> Travel |
| <input type="checkbox"/> Family Stories | <input type="checkbox"/> Occult & supernatural | <input type="checkbox"/> War & war stories |
| <input type="checkbox"/> Fantasy/Time Travel | <input type="checkbox"/> Outdoor Activities | <input type="checkbox"/> Westerns |
| <input type="checkbox"/> Fine Arts | <input type="checkbox"/> Philosophy | <input type="checkbox"/> Western History |
| | <input type="checkbox"/> Pioneer & frontier life | |
| | <input type="checkbox"/> Poetry | |

Favorite Reading Preferences: _____

Favorite Authors: _____

Other Preferences: (If not listed above) _____

LANGUAGES: If you wish to receive books in English language, mark "English" only. If you wish to receive books in other languages, mark "Other" and list the language(s):

English

Other language(s): _____

READING LEVEL: Adult Teenage Juvenile Preschool

EXCLUSIONS:

I do **NOT** wish to receive books that contain the following:

Some Strong language

Some descriptions of sex

Strong language

Descriptions of sex

Some Violence

Some explicit descriptions of sex

Violence

Explicit descriptions of sex

HOW DID YOU LEARN ABOUT US?

Please help us assess where you learned about the **Montana Talking Book Library**. It will help us plan our educational and outreach programs.

Check one or more of the following that apply:

- Another talking book or Braille Reader
- School System
- Montana Services for the Visually Impaired
- Other: _____
- Medical Professional
- Public Library
- Public Media
- Healthcare Facility

(please explain)

- Would you like a presentation about our library services?

Comments:

(Contact name, phone number, and email address)

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