DO YOU OFFER A PICK UP SERVICE?

• Library staff can select items for you that can be picked up by a friend or family member from any library branch.
• We need at least two days notice as well as the preferred genre to process your request.

FRIENDS OF MACKAY LIBRARIES

Friends of Mackay Libraries Inc. is a not-for-profit group that supports and promotes the services and needs of the library.

Our volunteers encourage community awareness by representing the library in your community, help with library programs and special events that promote libraries and learning and advocate for strong library support.

Friends of Mackay Libraries are a diverse group of volunteers who strongly advocates for our library. To find out more about Friends of Mackay Libraries Inc. please ask any of our friendly staff.

Mackay Regional Council Libraries
4961 9387
PO Box 41 Mackay
QLD 4740 | Australia

www.mackay.qld.gov.au/libraries
WHAT IS HOME LIBRARY SERVICE?
The Home Library Service ensures the information, recreation, cultural and educational needs of all library members are met by bringing the library service to the user.

WHO CAN USE THIS SERVICE?
- People who have an illness or disability that prevents them from visiting a library in person. These conditions may be temporary, recurring or permanent.
- People who are able to visit a library, but due to mobility restrictions, are unable to transport library items home.
- People who live in residential establishments such as nursing homes, hostels, hospitals.
- People who are engaged in full-time care for people with a disability.

HOW DO I JOIN?
- An initial interview with library staff to ascertain eligibility for the Home Library Service is recommended.
- A Home Library Service Membership form must be completed and returned to the library.
- An assessment by a library staff member will ensure the Home Library client receives their preferred reading material.

HOME LIBRARY MEMBERSHIP
Name: ____________________________
Address: ____________________________
Phone: ____________________________

I am unable to visit the library and wish to apply for membership of the Home Library Service.
Signature: ____________________________

Date: _____/_____/_____

To be completed by a Doctor, Community Nurse or Aged Care Worker:
I certify that, ____________________________ is housebound due to mobility or health reasons and is unable to personally visit the library:

☐ Permanently
☐ Temporarily (for a period of at least three months)

Signature: ____________________________
Date: _____/_____/_____

In case of emergency please include Doctor’s details.
Name: ____________________________
Phone: ____________________________

SELECTION CRITERIA:
Number of items: _____________
Requested format:
☐ Regular Print ☐ Large Print
☐ Audiobook: CD ☐ Audiobook: Playaway

Genres:
☐ General Fiction ☐ Australian
☐ Romance ☐ Fantasy
☐ Western ☐ Historical Romance
☐ Murder ☐ Thriller
☐ War ☐ Detective
☐ Crime ☐ Family Saga
☐ True Stories ☐ Non-Fiction
☐ Historical ☐ Contemporary Romance

Other formats available:
DVD: ☐ Movies ☐ TV Shows ☐ Documentary

Music Discs:

Magazines:

Authors you like to read: