

Good Neighbours Registration



Clarington Public Library

Experience **Community**

Please let a staff member know if you require assistance using this form. Call 905-623-7322, ext. 2712.

Contact Information:

Name:

Phone number:

Library card:

Volunteer Information (if applicable):

Name:

Phone number:

Preferred Formats (please check all that apply):

- Large print (hardcover) Books on CD (audio/talking books) Regular print (hardcover) Regular print (paperback)

Preferred Genres (please check all that apply):

- Award winners Romance Biography History Thriller
 Science-fiction Mystery Western _____ _____

Favourite Authors:

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Additional Comments:

<input type="text"/>
<input type="text"/>
<input type="text"/>

Upon return of this form to the library a library staff member of the Clarington Public Library will be phoning you to review your choices, explain procedures, and answer anymore of your questions.