LAMP/Library of Accessible Media for Pennsylvanians

4724 Baum Boulevard Pittsburgh, PA 15213 Phone: 800-242-0586

Please print or type

Fax: 412-687-2442 info@mylamp.org

Application for Free Library Service

Please complete this application and submit to LAMP Library of Accessible Media for Pennsylvanians. The application may be sent by email, fax, or printed and mailed.

ricase printe or type				
☐ Individual ☐ Institution				
Institution Name If applicable _				
Name Last	First	Middle		
Street Address	Apt	/Room		
CityCounty	State	Zip Code		
Primary Telephone	nary Telephone Date of Birth			
Alternate Telephone	Email			
☐ Email me a username/passwo		talog		
Alternative contact if you ca	nnot be reached			
Name:	_Relationship:			
Phone ()	Email:			
Veterans: Persons who are blir discharged from the United Stat recordings, playback equipment materials (Public Law 89-522).	es military receive p	reference in the lending of bool	ks	
☐ Check here if you were honor	ably discharged fror	n the United States military.		

Certification of Eligibility

Certifying Authority

Eligibility must be certified by one of the following: doctor of medicine, doctor of osteopathy, ophthalmologist, optometrist, psychologist, registered nurse, therapist, or professional staff of hospitals, institutions, and public or welfare agencies (such as an educator, social worker, case worker, counselor, rehabilitation teacher, certified reading specialist, school psychologist, superintendent, or librarian).

To be completed by Certifying Authority (as described above)

I certify that the named applicant is unable to read or use standard print material for the reason indicated below:

☐ Blindness: Vision 20/	200 or less, or vi	isual field of	20 degrees or less.	
☐ Visual Impairment:	Visual disabilities	s that make i	t difficult to read standar	rd print.
Conditions such as macu	ar degeneration,	cataracts, g	laucoma, diabetic retinor	pathy,
retinitis pigmentosa, and	strabismus.			
☐ Physical Disability:	Physical disabiliti	es of the har	nds that make it difficult	to hold a
book or turn pages, such	as stroke, Parkir	nson's Diseas	e, multiple sclerosis, mu	scular
dystrophy, traumatic brai	n injury, arthritis	s, neuropathy	, and injury or loss of th	e hand.
□ Deaf-Blindness				
☐ Reading Disability:	Reading disability	y, such as dy	slexia.	
N. / I				
Name (please print)		I itle		
Organization		Email		
Organization		LIIIaII		
Address		Phone		
		1110116		
City	State		Zip	
,				
Signature		Date		

A typed signature is acceptable if application is submitted electronically by the certifying authority.

Services and Equipment

All books and equipment are sent and returned through the mail free of charge. Please select the services you would like to receive. ☐ Talking Books on digital cartridge and a digital player needed to use them. ☐ **Standard Digital Player.** This machine has eight controls and includes built-in audio instructions. ☐ **Advanced Digital Player.** This machine has 13 controls. This player allows for bookmarking and navigating book levels. Special Accessories to use with the talking book player ☐ **Headphones** – for private listening ☐ **Digital Talking Book Cartridge Cable** (used to connect a digital talking book cartridge to a USB port on a computer) ☐ Breath Switch Adapter/Remote Control helps readers who have severely limited use of their hands. ☐ **High Volume Player** aids readers with a severe hearing impairment. ☐ Braille and Audio Reading Download (BARD) Downloadable talking books and Web-Braille. An email address for BARD registrationis required. Use with iOS, Android and other devices. ☐ Braille Books ☐ Large Print Books These books with larger-than-standard type are only available to individual readers. ☐ **Described Movies on DVD** These DVDs have a menu option for audio description.

Return of Materials and Equipment: Playback equipment and library materials are supplied to eligible persons on extended loan. If this equipment is not being used with audio reading material provided by the Library of Congress and its cooperating libraries, it must be returned to the Library of Accessible Media for Pennsylvanians.

Reading Preferences

Please check the reading levels you prefer
 □ Preschool □ Kindergarten to 3rd Grade □ Elementary □ Middle Grade □ Young Adult □ Adult
Please check the subjects you prefer
 □ Adventure/Thriller □ African American □ Best Sellers □ Biography □ Classics □ History- U.S. □ Inspirational □ LGBTQ+ □ Mystery □ Romance
Other subjects of interest
Favorite authors or series
I do not wish to receive books that contain
□ Explicit Descriptions of Sex□ Strong Language□ Violence

How did you hear about this free library service?

☐ Consumer/Support Group	
□ Event/Expo	
☐ Friend/Family	
☐ Internet/Social Media (describe)	
□ Other (describe)	
☐ Other Healthcare Professional	
□ Public Library	
□ Radio Ad	
□ School	
□ TV Ad	
□ Veterans Affairs/Defense Health Agency	
□ Vocational Rehabilitation Center	