



State Library of Oregon  
Talking Book and Braille Library

**Talking Book and Braille Library**

State Library of Oregon  
250 Winter St NE, Salem, OR 97301

**Toll Free (in state):** 800-452-0292

**Phone:** 503-378-5389

**Fax:** 503-373-7439

**Email:** talkingbooks.info@slo.oregon.gov

**Web:** TalkingBooks.Oregon.gov

**APPLICATION FOR FREE  
LIBRARY SERVICE**

Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (M.I.) \_\_\_\_\_

Care Of (If applicable) \_\_\_\_\_

Mailing Address \_\_\_\_\_ Apt/Sp # \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_      Female      Male      Non-Binary

Alternate Contact (Name & Relation) \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Check here if you have been honorably discharged from the United States military

**What book formats are you interested in?**      Audio      Braille

**How did you hear about the Talking Book and Braille Library?**

- |                            |                       |                  |
|----------------------------|-----------------------|------------------|
| Activity Director          | Oregon Comm f/t Blind | Social media     |
| Conference / resource fair | Presentation          | Therapist        |
| Consumer / support group   | Previous user         | Transfer         |
| Friends / family           | Radio commercial      | TV commercial    |
| Health care provider       | Rehab facility        | Veterans Affairs |
| Library                    | School / teacher      | Word of mouth    |
| Online / website           | Social / case worker  | Other: _____     |

**Please submit your completed application by mail, fax, or scan/email**

## Page 2: Reading Preferences

**How would you like to get books?**

Mail books to me based on my preferences and requests.

Only send me the specific titles I ask for (skip to page 3).

I will just download books; no books in the mail (skip to page 3).

**Reading level(s):**

Adult

Grades 6-9

Grades 3-6

High School

Grades 5-8

Grades 2-4

Jr High

Grades 4-7

Grades Pre K-2

**Subject Preferences:** (Check as many as you want; use the white space to write in any sub-categories or related interests)

### FICTION

Adventure

Nostalgic Stories

Science Fiction

Mysteries

Women's Literature

Medical Themes

Folklore/Myths

Animal stories

Spy/Espionage

Historical novels

Classics

Westerns

Romances

Oregoniana

War

Humor

Sports

Christian

Poetry

Occult/Horror

Bestsellers

### NON-FICTION

Adventure

History

Philosophy

Politics \_\_\_\_\_

Biographies

Career/Business

Religion \_\_\_\_\_

Humor

Parenting

Health \_\_\_\_\_

Travel

Self-Help/Inspirational

Science

Cooking

War

Animals/Nature

Gardening

Sports

Oregoniana

Crafts

Bestsellers

Do you have special interests, favorite authors, or want books in languages other than English? (Please write them in below):

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Check the options below for content and length exclusions:

No explicit descriptions of sex

No long-length books (over 20 hrs)

No strong language

No medium-length books (over 13 hrs)

No violence

No

narrators

No accented narrators

### Page 3: Optional Extras and Accessories

NOTE: Books and magazines are recorded in a special format. **All new users receive the necessary audio book player for free on extended loan; it is required to play our audio books.** Below are the additional optional services and accessories our library makes available to interested users. Please refer to the included insert for more information.

- Downloadable books and magazines (BARD):  
Computer downloads to flash drive or blank cartridge  
BARD Mobile app for iOS and Android devices
- NFB-Newsline®:
- Descriptive Videos:
- Magazines:  
Audio      Braille
- Non-Partisan Voters' Guide:  
(state-wide elections only)  
Audio      Large Print

#### **Accessories:**

USB Port Adaptor: positions a flash drive flush along the side of the player instead of having it stick straight out. Only needed if you plan to download books using BARD and load them onto a flash drive.

Blank Cartridge Cable: three-foot USB cable that connects a blank cartridge to your computer. Only needed if you plan to download books using BARD and load them onto a blank cartridge.

Headphones: on-ear stereo headphones.

Remote Control: wirelessly controls the player from up to 30 feet

Breath Switch: controls the player using a pattern of puffs and sips

#### **User Agreement:**

All equipment, accessories, and reading materials are property of the U.S. government and are supplied to registered persons free on loan. If the equipment is not being used in conjunction with reading material provided by the National Library Service and its network libraries, then it must be returned to the issuing library. **One book or magazine must be borrowed or downloaded annually in order to maintain an active status and retain use of equipment and accessories.**

I have reviewed and agree to these terms \_\_\_\_\_ (initial)

## Page 4: Certification of Eligibility

All applications must be signed by a doctor, nurse, therapist, librarian, educator, social or case worker, activity director, or other professional staff of a hospital, care facility, or social welfare agency at the bottom of this page to certify your eligibility. Qualified library users must be residents of the United States or United States citizens living abroad.

### 1. Legally Blind

2. **Visually Impaired:** persons who need aids other than regular glasses for reading standard printed materials. Common examples include (but are not limited to): macular degeneration, glaucoma, cataracts, diabetic retinopathy, etc.

3. **Physically Impaired:** persons unable to read or unable to use standard printed material as a result of physical limitations. Common examples include (but are not limited to): multiple sclerosis, stroke, Parkinson's, paraplegia, etc.

### 4. Deaf-Blind

5. **Reading Impaired:** persons having a perceptual impairment of sufficient severity to prevent their reading in a normal manner. Common examples include (but are not limited to): dyslexia, dysphasia, after effects of a traumatic brain injury, etc.

**NOTE:** Section below to be completed by certifying authority (see paragraph at top of page). **Family member or self-certification NOT accepted.**

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**I certify that the applicant is unable to read or use standard printed material for the reason(s) indicated above.**

\_\_\_\_\_  
Certifier's Full Name

\_\_\_\_\_  
Title/Occupation

\_\_\_\_\_  
Certifier's Signature

\_\_\_\_\_  
Date

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_\_\_  
Certifier's Email

\_\_\_\_\_  
Certifier's Phone