

## **NASHVILLE TALKING LIBRARY**



## An Audio Information Service of Nashville Public Library

First Name	Last Name			
Address				
City	StateZip Cod	le		
County				
Is this a high-rise buildir	ng? Yes No			
Phone	Date of Birth	Gender		
Email Address				
	o will know your address if you n			
Please list someone who		nove:		
Please list someone who	o will know your address if you n	nove:		
Please list someone who	o will know your address if you n	nove:		
Please list someone who  Name low do you plan to listen? ( <i>Ch</i>	o will know your address if you nPhone neck all that apply)	rary.org)		
Please list someone who Name low do you plan to listen? ( <i>Ch</i> ive Stream:	o will know your address if you n Phone eck all that apply) (www.nashvilletalkinglib)	rary.org) instructions)		

Would you like to receive a Program Guide? Yes No

Would you like to have your birthday announced on the air? Yes No

Nashville Talking Library programming is intended solely for individuals who cannot read conventional print due to a disability. Our programs may not be copied or redistributed.

1. Qualifying Condition	ո։					
Visual Disability	Physical Disab	oility	Reading Disability			
2. Please have certified by one of the following: (A family member is not eligible to certify you						
Licensed Medical Profe	ssional	Social Wo	rker			
Rehabilitation counseld	or					
Other Professional (spe	ecify)					
Name (print)						
Signature						
Phone						
Email						
Referral Source: How o	lid you hear a	bout the N	ashville Talking Library?			

## Return completed application to:

Email: NTL@Nashville.gov

Mail: Nashville Talking Library

615 Church Street, Nashville, TN 37219

Fax: 615-862-5494

615-862-5874

www.nashvilletalkinglibrary.rog

Office Use Only: Receiver #	Date Mailed: