

## **LIBRARY FOR THE BLIND AND PHYSICALLY HANDICAPPED REGISTRATION INFORMATION**

### **WHO IS ELIGIBLE:**

1. Individuals with visual impairments:
  - The legally blind.
  - Those unable to read standard printed material with normal corrective lenses.
  - Those unable to read comfortably for a reasonable length of time without special aids or devices other than regular glasses.
2. Individuals with physical disabilities who are certified by a competent authority as unable to read or unable to use standard printed material, including but not limited to those unable to turn pages or hold a book because of muscle or nerve deterioration or paralysis.
3. Individuals having a reading disability resulting from organic dysfunction and of sufficient severity to prevent their reading printed material in a normal manner. **Must be certified by a medical doctor. See page 4.**
4. Those with **temporary** conditions listed above.
5. **Qualified readers must be residents of the United States, including territories, insular possessions, and the District of Columbia, or American citizens domiciled abroad.**

Revised September 2008

## **SERVICES AVAILABLE:**

Materials obtained from the Library of Congress, National Library Service for the Blind and Physically Handicapped (NLS), as well as other materials purchased with State and donated funds are available for loan from the Hawaii State Library for the Blind and Physically Handicapped (LBPH):

1. **BOOKS:**

- Recorded Cassettes (RC)
- Braille Books (BR)
- Locally Produced Cassettes (HIC)
- Locally Produced Braille (HIB)
- Locally Produced Large Type (HIL)

2. **MAGAZINES:** on cassette and in large type and braille. Direct mail subscriptions from the producer available free of charge.

3. **CATALOGS:** Listings of books and magazines available in large type, cassette, braille and computer disk. Direct mail subscriptions from the producer available free of charge.

4. **MACHINES:** Special machines designed to play the NLS distributed cassettes. Machine repair for malfunctioning NLS equipment is provided by LBPH.

5. **DESCRIPTIVE VIDEOTAPES FOR THE BLIND (DVT).**

6. **LARGE TYPE (LT) BOOKS AND MAGAZINES:** A Hawaii State Public Library System library card is

needed to borrow the large type books and magazines.

7. **REGULAR PRINT BOOKS AND MAGAZINES ON DISABILITIES:** A Hawaii State Public Library System library card is needed to borrow these materials.
8. **RADIO READING SERVICE - HAWAII (RRS):** Closed circuit broadcast of local newspapers and magazines from LBPH over a subchannel of Hawaii Public Radio (KHPR). Special radio receiver from LBPH required.
  - Broadcast: Monday to Friday, 8:00 a.m. - 9:00 a.m. and 8:00 p.m. - 9:00 p.m.
  - Presently available only on Oahu, Maui and Kona.
9. **TRANSCRIBING SERVICES** in large type, braille and cassette. Priority is given to textbooks. Other materials not already produced in the desired format may be transcribed upon request.

Procedures available upon registering.
10. **LBPH NEWSLETTER:** Published 4 times a year. Available in large type, cassette, braille, computer disk or e-mail. Also available on-line at:  
  
<http://www.librarieshawaii.org/locations/oahu/lbph.htm>
11. **LIST OF NEW LARGE TYPE BOOKS:** Mailed 4 times a year.

## **HOW TO APPLY:**

1. Complete the attached application form.
2. Have it signed by a “Competent Authority”.

## **WHO IS A “COMPETENT AUTHORITY”?**

1. In cases of **blindness, visual disability, or physical limitations**, “Competent Authority” is defined to include doctors of medicine, doctors of osteopathy, ophthalmologists, optometrists, registered nurses, therapists, professional staff of hospitals, institutions, and public or welfare agencies (e.g. social workers, case workers, counselors, rehabilitation teachers and superintendents).

In the absence of any of these, certification may be made by professional librarians or by any person whose competence under specific circumstances is acceptable to NLS.

2. In the case of a **reading disability from an organic dysfunction (physically based), such as dyslexia**, “Competent Authority” is defined as doctors of medicine and doctors of osteopathy who may consult with colleagues in associated disciplines.

**APPLICATIONS FOR READING DISABILITIES MUST BE CERTIFIED BY A MEDICAL DOCTOR OR DOCTOR OF OSTEOPATHY, as stated in Public Law 89-522.**

3. **Relatives of applicants are not authorized as the “Competent Authority”.**
4. Applicants are not authorized to sign their own forms, including those borrowing for an institution or agency.

### **LENDING OF MATERIALS AND CLASSES OF BORROWERS:**

1. **Veterans:** In the lending of books, materials and playback machines, preference shall be given at all times to the needs of the blind and other physically disabled persons who have been honorably discharged from the armed forces of the United States.
2. **Institutions:** Reading materials and playback machines for the use of blind and physically disabled persons may be loaned to individuals who qualify, to institutions such as nursing homes and hospitals and to schools for the blind or physically disabled for the use of such persons only.

Reading materials and playback machines may also be used in public or private schools where disabled students are enrolled. However, **the students must be certified as eligible on an individual basis and must be the direct and only recipients of the materials and equipment.**

## **FOR MORE INFORMATION**

### **Contact LBPH:**

- M, W, Th, F: 8:30 a.m. - 4:30 p.m.
- T: 10:00 a.m. - 6:00 p.m.
- S, SU: CLOSED
  
- **Phone:** (808) 733-8444 (Voice/TTY)
  
- **E-mail:** [olbcirc@librarieshawaii.org](mailto:olbcirc@librarieshawaii.org)

**Neighbor Islands Only:** Call 1-800-559-4096 (Toll Free)

## **RETURN THE APPLICATION FORM TO:**

Library for the Blind and Physically Handicapped  
402 Kapahulu Avenue  
Honolulu, HI 96815

**Neighbor island patrons** may return form to LBPH or:

### **Hawaii:**

Hilo Public Library  
300 Waianuenue Avenue  
Hilo, HI 96720

Phone: (808) 933-8890 (Voice/TTY)

**Kauai:**

Lihue Public Library  
4344 Hardy Street  
Lihue, HI 96766

Phone: (808) 241-3222

**Maui:**

Kahului Public Library  
90 School Street  
Kahului, HI 96732

Phone: (808) 873-3097 (Voice)  
(808) 873-3087 (TTY)

**Guam:**

Guam Subregional Library for the Blind and Physically  
Handicapped  
Nieves M. Flores Memorial Library  
254 Martyr Street  
Agana, Guam 96910

(671) 472-6417

**LC - Individuals**

**LIBRARY FOR THE BLIND AND PHYSICALLY HANDICAPPED  
APPLICATION FOR FREE LIBRARY SERVICE**

**PLEASE PRINT OR TYPE**

**DATE** \_\_\_\_\_

**NAME OF APPLICANT** \_\_\_\_\_  
(Mr. Mrs. Ms. Miss)      Last                                      First                                      Initial

**ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**DATE OF BIRTH** \_\_\_\_\_ **Sex** ( ) Female ( ) Male

**ALTERNATE CONTACT PERSON - ONLY IF person registering is not able to communicate with the library ):**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**VISITOR** ( ) Yes    Dates of Visit \_\_\_\_\_  
Home (Talking Book) Library \_\_\_\_\_

**PERMANENT ADDRESS/PHONE (IF NOT SAME AS ABOVE):**

Address \_\_\_\_\_

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

Phone (\_\_\_\_\_) \_\_\_\_\_

( ) By law, preference in the lending of books and equipment is given to

**veterans.** Check here if honorably discharge from the armed forces of the United States.

**All information is confidential.**

**Revised July 2005**

**I authorize the following professional to release information certifying my eligibility to use this service:**

**Patron's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**TO BE COMPLETED BY A COMPETENT AUTHORITY**

I certify that the applicant is unable to read or use standard print materials for the reasons indicated below. **PLEASE PRINT OR TYPE.**

- ( ) **Blindness:** Visual acuity, as determined by competent authority, is 20/200 or less in the better eye with correcting lenses, or whose widest diameter of visual field subtends an angular distance no greater than 20 degrees.
- ( ) **Visual Disability:** Visual disability, with correction and regardless of optical measurement is certified by competent authority as preventing the reading of standard print material.
- ( ) **Physical Disability:** Inability to read or unable to use standard print material as a result of physical limitations.
- ( ) **Reading Disability:** Organic dysfunction of sufficient severity, such as dyslexia, as to prevent reading print material in a normal manner.  
**CERTIFICATION MUST BE BY A DOCTOR OF MEDICINE OR DOCTOR OF OSTEOPATHY.** See section on "Competent Authority".

( ) **Deaf/Blind:**

**Temporary Disability:** ( ) Yes      **Length of Time:** \_\_\_\_\_

- Hearing Impairment:     Moderate (some difficulty hearing and understanding speech).  
                                   Profound (difficulty hearing and understanding speech).

Print Name of Competent Authority \_\_\_\_\_ Date \_\_\_\_\_

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

Address \_\_\_\_\_ Phone: \_\_\_\_\_

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

Signature \_\_\_\_\_

**(Relatives may not sign for applicant as the “Competent Authority”)**

### **BOOKS/MAGAZINES**

**Please check the items you wish to receive:**

- |   |  |
|---|--|
| <input type="checkbox"/> Books on Cassette Tape | <input type="checkbox"/> Descriptive Videotapes          |
| <input type="checkbox"/> Braille Books          | <input type="checkbox"/> Magazines on Cassette Tape      |
| <input type="checkbox"/> Large Type Books *     | <input type="checkbox"/> Braille Magazines               |
|   | <input type="checkbox"/> Large Type Magazines (non-NLS)* |

**\* Hawaii State Public Library System Library Card required - indicate card number: \_\_\_\_\_**

### **READING PREFERENCES**

I will select titles

**OR**

Library will select books for me in the following categories. **LIMIT NUMBER TO TEN (10).**

**Fiction**

**Non-Fiction**

- |   |  |
|---|--|
| <input type="checkbox"/> Adventure Stories            | <input type="checkbox"/> Autobiographies/Biographies       |
| <input type="checkbox"/> Animal Stories               | <input type="checkbox"/> Bestsellers                       |
| <input type="checkbox"/> Bestsellers                  | <input type="checkbox"/> Cooking/Diet & Nutrition          |
| <input type="checkbox"/> Classics                     | <input type="checkbox"/> Current Affairs                   |
| <input type="checkbox"/> Contemporary/General Fiction | <input type="checkbox"/> Hawaiiana                         |
| <input type="checkbox"/> Family Stories               | <input type="checkbox"/> History, U.S.                     |
| <input type="checkbox"/> Historical Novels            | <input type="checkbox"/> History, World                    |
| <input type="checkbox"/> Legal Stories                | <input type="checkbox"/> Humor (incl. Fiction)             |
| <input type="checkbox"/> Mysteries/Detective          | <input type="checkbox"/> Medicine & Health                 |
| <input type="checkbox"/> Occult/Horror                | <input type="checkbox"/> Stage/Screen/TV (incl. Biography) |
| <input type="checkbox"/> Political Stories            | <input type="checkbox"/> Nature (incl. Fiction)            |
| <input type="checkbox"/> Romance                      | <input type="checkbox"/> Physical Science                  |
| <input type="checkbox"/> Science Fiction              | <input type="checkbox"/> Politics/Government - U.S.        |
| <input type="checkbox"/> Short Stories                | <input type="checkbox"/> Religion: Denomination _____      |
| <input type="checkbox"/> Spy/Espionage                | <input type="checkbox"/> Social Science                    |
| <input type="checkbox"/> Thrillers/Suspense           | <input type="checkbox"/> Sports                            |
| <input type="checkbox"/> War Stories                  | <input type="checkbox"/> Travel                            |
| <input type="checkbox"/> Westerns                     | <input type="checkbox"/> War                               |
| <input type="checkbox"/> Other _____                  | <input type="checkbox"/> Other _____                       |

**DO NOT WANT**

**SOME OK**

Sex	_____	_____
Violence	_____	_____
Rough Language	_____	_____

Reading Level:  Pre-school  
 Elementary Grade \_\_\_\_\_  
 Junior High Grade \_\_\_\_\_  
 Young Adult Grade \_\_\_\_\_  
 Adult

**Foreign Language Materials:**

Spanish \_\_\_\_\_ Other \_\_\_\_\_

**MAILING INSTRUCTIONS FOR BOOKS: ONE ONLY.**

- "Turnaround" (one book will be sent when one book is returned)
- "On Demand" (send books only when I request them).

**CATALOGS:** NLS provides catalogs for **patrons to select their own books.**  
Please mark the preferred format you would like to receive. **ONE ONLY.**

Large Type (  )    Cassette (  )    Braille (  )    Computer Disk (  )

**LBPH NEWSLETTER:** LBPH publishes a newsletter 4 times a year. Please mark the preferred format you would like to receive. **ONE ONLY.**

Large Type (  )    Cassette (  )    Braille (  )    Computer Disk (  )

E-mail (  ) E-mail address: \_\_\_\_\_

The newsletter is also available on-line at:

**<http://www.librarieshawaii.org/locations/oahu/lbph.htm>**

**EQUIPMENT/ACCESSORIES**

**FOR LIBRARY USE**  
Model/Serial Number

**Please check the items you wish to receive.**

- ( ) **Cassette Book Machine** (standard) \_\_\_\_\_
- ( ) **Easy Cassette Machine (E-1)** \_\_\_\_\_  
(Only for persons who cannot operate  
the controls of the standard cassette  
machine)
- ( ) **Headphone** (standard) \_\_\_\_\_
- ( ) **Pillowphone** \_\_\_\_\_  
(Only for persons confined to bed)
- ( ) **Extension Levers** \_\_\_\_\_  
(For those with limited use of their hands.  
For standard cassette player)
- ( ) **Headphone Amplifier \*** \_\_\_\_\_  
(For those with a hearing impairment.  
Form must be signed by a physician or  
audiologist)
- ( ) **Remote Control Unit \*** \_\_\_\_\_  
(For those confined to bed or with  
limited use of their hands)
- ( ) **Breath Switch** \_\_\_\_\_  
(For those with little or no use of  
extremities. Must be used with  
Remote Control Unit)
- ( ) **Radio Reading Service Receiver** \_\_\_\_\_

**\*Special application required. May take 4 weeks to receive.**

**INSTRUCTIONS FOR RECEIVING EQUIPMENT:**

- ( ) Send the equipment to address indicated on form.
- ( ) Will pick up equipment at LBPH.
- ( ) Will pick up at nearest public library.

Specify: \_\_\_\_\_

**Playback equipment and special attachments are supplied to eligible persons on extended loan. If this equipment is not being used in conjunction with the recorded reading material provided by the National Library Service for the Blind and Physically Handicapped and its cooperating libraries, it MUST be returned to the issuing agency.**

# # # # # #

**FOR LIBRARY USE ONLY**

Patron ID No. HI1A \_\_\_\_\_

HSPLS No. \_\_\_\_\_ Large Type Only \_\_\_\_\_

Welcome Letter \_\_\_\_\_  
Instructions \_\_\_\_\_  
Loan Policy \_\_\_\_\_

LT Instructions \_\_\_\_\_  
DVT List \_\_\_\_\_  
TSS Procedures \_\_\_\_\_

Send copy of application to: Hawaii ( ) Kauai ( ) Maui ( ) Date Sent \_\_\_\_\_

Catalogs (list):