

Lauri Ann West Memorial Library
Outreach Survey for Individual Participants

Name _____

Address _____

Telephone _____

Type of Material(s) Desired

_____ Regular Print Books	_____ Books on CD	_____ Music CDs
_____ Large Print Books	_____ Books on Tape	_____ Other (please specify):
_____ Paperback	_____ Videos	_____
_____ Magazines	_____ DVDs	_____

Reading Preferences: Fiction

_____ Regular Fiction	_____ Classics	_____ Humor
_____ Mysteries	_____ Romance	_____ Science Fiction
_____ Science Fiction	_____ Westerns	_____ Other (please specify):
_____ Suspense		_____

Favorite Authors: _____

Reading Preferences: Non-Fiction

_____ Biography	_____ Animals	_____ Business/Economics
_____ Sports	_____ Nature	_____ Religion
_____ Health	_____ Travel	_____ Spiritual/Inspirational
_____ Cookbooks	_____ Other	

specify): _____ (please

Specific Authors: _____

Return or mail this form to:

Lauri Ann West Memorial Library
1220 Powers Run Rd.
Pittsburgh, PA 15238
ATTN: Anthony/Outreach