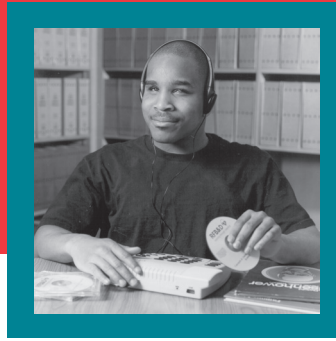


RFB&D

learning through listening



**Application for
RFB&D's Learning Through Listening®
Individual Membership**



Welcome to Recording for the Blind & Dyslexic®!

RFB&D®, a nonprofit organization, is the nation's educational library serving people who cannot read standard print effectively because of a visual impairment, learning disability or other physical disability.

We lend audiobooks in a broad range of subjects at all educational levels, from kindergarten to post-graduate studies.

Our mission is to create opportunities for individual success by providing, and promoting the effective use of, accessible educational materials.

Our vision is for all people to have equal access to the printed word.

We look forward to serving you.

Recording for the Blind & Dyslexic

20 Roszel Road

Princeton, NJ 08540

Tel: 800-221-4792

Fax: 609-987-8116

www.rfbd.org

Or contact your local RFB&D office – visit www.rfbd.org to find a location near you.

Membership Information

Eligibility

Anyone with a documented print disability, such as a learning disability, visual impairment or other physical disability, is eligible to become a registered member with RFB&D. To register as an individual member, you or your school should complete and return the *Individual Membership Application Form* with a \$65 registration fee and a \$35 annual membership fee.

How to Register

To register as an individual member, you or your school must do the following:

1. Complete all sections of RFB&D's Individual Membership Application Form.
2. Include \$100 payment (\$65 registration fee plus \$35 annual membership fee).
3. Send both to:

RFB&D
Attn: Member Services
20 Roszel Road
Princeton, NJ 08540

4. For credit card orders or purchase orders, you may fax the application and payment to 609-987-8116.

Memberships are typically processed within two weeks of receipt of application and payment.

Cancellations

Members may cancel their membership for a full refund within 90 days of registration, and the return of any books. Cancellations made after 90 days will forfeit membership and registration fees.

Tools for Success: Audiobook Players and Accessories

In order to access **RFB&D's AudioPlus®** books or **RFB&D's Classic Cassettes™**, you will need to use specialized playback equipment such as specially adapted CD-ROM Players or software, or four-track cassette players. RFB&D offers for nonprofit sale a broad line of specialized players and accessories. Visit www.rfbd.org for more details or to place an order or contact member services at **800-221-4792** to order equipment or receive a copy of *Tools for Success: RFB&D's Catalog of Players and Accessories*.

Ordering Audiobooks: RFB&D's Audiobook Library and Online Book Catalog

RFB&D's CV Starr Learning Through Listening Library is the largest educational resource of its kind in the world. **RFB&D members may borrow up to 35 audio textbooks for up to one year**, after which membership may be renewed.

You may now order RFB&D's audiobooks and players online at www.rfbd.org. If you don't have access to the web, you may also call **800-221-4792**.

Application for RFB&D's Learning Through Listening Individual Membership

SECTION 1: APPLICANT INFORMATION

- 1 Applicant's Name* (First, Last) _____
- 2 Date of Birth* (Month, Day, Year) _____
- 3 Is the applicant a US citizen?* Yes No If no, is applicant residing in the US? Yes No
- 4 Home Address* _____
Address (cont) _____
City _____ State _____ ZIP/Postal Code _____ Country _____
- 5 Home Phone* () _____
- 6 Mailing Address (If different from home address)* _____
Address (cont) _____
City _____ State _____ ZIP/Postal Code _____ Country _____
- 7 Daytime/Work Phone () _____ 8 Fax () _____
- 9 E-mail Address _____ *Required if you plan to order RFB&D's audiobooks and players online.*
- 10 Is the applicant a student?* Yes No If so, what grade? _____
- Please circle or place an "X" next to the type of educational setting:
- | | |
|---|---|
| <input type="checkbox"/> Public School | <input type="checkbox"/> Private School |
| <input type="checkbox"/> Undergraduate/Graduate College or University | <input type="checkbox"/> Correctional Institution |
| <input type="checkbox"/> US School Abroad | <input type="checkbox"/> Non-US School Abroad |
| <input type="checkbox"/> Home Schooling | <input type="checkbox"/> Other _____ |
- 11 What is the applicant's major? (for college students) _____
- 12 Name of School _____
Address _____
Address (cont) _____
City _____ State _____ ZIP/Postal Code _____ Country _____
- 13 School Contact Name _____ 14 Phone () _____

***REQUIRED INFORMATION**

- 15 What is your field of employment? *(for adults)* _____
- 16 How did you hear of RFB&D? School Newspaper/Magazine
 Ad Conference/Fair
 Library TV/Radio/Billboard
 Word of mouth Other _____

The following questions are for statistical purposes only and are optional.

- 17 Applicant's Ethnic Background: African American American Indian/Alaskan Native
 Asian Caucasian Hispanic Other
- 18 Family Annual Income Level: \$0 - \$25,999 \$26,000 - \$50,999 \$51,000 - \$75,999
 \$76,000 - \$99,999 \$100,000+

SECTION 2: COPYRIGHT ACKNOWLEDGMENT (REQUIRED)

**Please read the statement below and sign at the bottom.
 Your membership application cannot be processed without a signature.*

The contents of *all* RFB&D books are protected under copyright law, and thus require special playback equipment. RFB&D strictly regulates the distribution of materials within a qualified member population that has provided documented evidence of a print disability. Copying, sharing or redistributing RFB&D's books in any form to any person is strictly prohibited by law and is a violation of publishers' rights and the terms of your RFB&D membership. Violators face permanent suspension of RFB&D membership benefits and possible civil or criminal penalties.

I understand the statement above and agree to all the terms and conditions of RFB&D membership. I agree not to copy, share or redistribute RFB&D's books in any form, to any person. I understand that to do so may result in permanent suspension of RFB&D membership benefits and possible civil or criminal penalties.

Signature of Member* **X** _____
 (or Parent/Guardian if Member is under 18 years old)

Print Name _____ Date _____

SECTION 3: PARENTAL INFORMATION (REQUIRED IF APPLICANT IS UNDER 18)

19 Name of Parent(s) or Guardian(s)* _____

20 Parent or Guardian's Authorization for Service

Signature* **X** _____ Date _____

21 Parent's Address *(if different from applicant)** _____

Address *(cont)* _____

City _____ State _____ ZIP/Postal Code _____ Country _____

22 Parent or Guardian's Phone* () _____ 23 Parent or Guardian's E-mail _____

24 Name of Parent or Guardian's Employer *(optional)* _____

SECTION 4: SELECTION OF INDIVIDUAL MEMBERSHIP TYPE

Schools that have identified RFB&D's recorded books as an appropriate accommodation for students are required to provide access to RFB&D's recorded books in compliance with federal disability legislation including the Individuals with Disabilities Education Act (IDEA) and Section 504 of the Rehabilitation Act of 1973.

If you are in school and have a documented print disability, choose the **Student Individual Membership** option and submit this completed form to the school for payment. Please note that schools may be registered as an RFB&D Learning Through Listening Institutional Membership, through which the applicant's needs may be met. A school may decline payment for Student Individual Membership if it believes its institutional membership offers the applicant an appropriate accommodation.

Alternatively, by selecting the **Personal Individual Membership** option, the applicant elects to pay membership fees directly to RFB&D. Applicants may choose this type of membership for a variety of reasons. For example, they may wish to borrow books that are not part of their schools' curricula; they may not wish to disclose their disability to their school; their school may not recognize their disability; they may not be enrolled as students; or they may have other personal reasons.

For more information on the rights of students with disabilities, visit the US Department of Education, Office of Special Education and Rehabilitative Services website at www.ed.gov/offices/OSERS. You may also call the US Department of Education at 800-872-5327.

***PLEASE SPECIFY TYPE OF MEMBERSHIP for:** _____
applicant's name

Student Individual Membership

- My school will pay for my membership** (A Check or Purchase Order from the school in the amount of \$100 must be attached)

NOTE: If your school has indicated that RFB&D's audiobooks are an appropriate accommodation, but declines to support the payment of membership fees, please call 800-221-4792 to request a Student Individual Membership Fee Waiver form.

Personal Individual Membership

- I will pay for my membership personally** (Please include payment in the amount of \$100)

NOTE: If payment of RFB&D's membership fee is a financial hardship, please call 800-221-4792 to request a Personal Individual Membership Fee Waiver form.

SECTION 5: PAYMENT INFORMATION (REQUIRED)

1 Method of Payment

- Check (payable to RFB&D) Money Order Purchase Order/Voucher (Please attach)
- VISA MASTERCARD DISCOVER AMEX

2 Credit Card Number _____

3 Expiration: Month _____ Year _____

4 Signature **X** _____ Date _____

SECTION 6: DISABILITY VERIFICATION (REQUIRED)

- 1 Please indicate the disability that limits your ability to read standard print effectively (*check all that apply*):
- Visual Impairment/Blindness Learning Disability Other Physical Disability
- 2 Do you read braille? Yes No
- 3 Does your school have an Individualized Education Plan (IEP) for you? Yes No

SECTION 7: APPLICANT DISABILITY CERTIFICATION (REQUIRED)

Option 1:

Please have the following certification completed by a qualified professional in the field of disability services, education, medicine or psychology. The certifier must be a recognized expert who attests to the physical basis of the visual, perceptual or other physical disability which limits the applicant's use of standard print. Appropriate certifying experts may differ from disability to disability. For example, in the case of blindness and visual impairments, an appropriate certifier may be a physician, ophthalmologist, or optometrist; in the case of a perceptual disability, a neurologist, learning disability specialist, or psychologist with a background in learning disabilities may be the most qualified certifying professional.

I attest to the physical basis of the visual, perceptual or other physical disability limiting the applicant's ability to effectively use standard print. I also attest to my competency to make this certification.

- 1 Name of Certifying Professional (*please print*) _____
- 2 Signature **X** _____ Date _____
- 3 Title _____
- 4 Place of Employment _____
- 5 Address _____
- City _____ State _____ ZIP/Postal Code _____ Country _____
- 6 Daytime Telephone _____ 7 e-mail _____

Option 2:

If you are receiving services from The National Library Service for the Blind and Physically Handicapped (NLS) or its cooperating network libraries, we will accept a signature from one of their librarians in place of Option 1. For applicants in Canada or the United Kingdom: If you are registered with the Canadian National Institute for the Blind (CNIB) or the Royal National Institute for the Blind (RNIB), you may send proof of this registration in place of the information requested above.

All information on this application is considered confidential. RFB&D does not sell to, trade to or otherwise share member information with any third parties; however, in conjunction with RFB&D's funding programs, aggregate data may be provided to agencies and institutions when needed for verification purposes or to illustrate the extent of services rendered. You may also receive communications regarding RFB&D's products and services, and information on ways you can help support RFB&D's mission.

SECTION 8: ORDER FORM

1. MEMBERSHIP FEE (\$65 Registration + \$35 Annual Fee) = \$100

\$100
Membership Fee

2. EQUIPMENT RFB&D's audiobooks require specialized playback equipment (see section 2). Visit our website www.rfbd.org for additional product information on our CD-ROM and cassette players, or software options starting at \$45.00. You can get started immediately by ordering your CD-ROM player(s) now!

Victor Reader Classic+ Desktop CD-ROM player **\$375.00 (plus shipping)**
Sturdy desktop model for classroom or home use

Telex Scholar CD-ROM player **\$249.00 (plus shipping)**
Portable hand held unit for students and professionals on the go

QTY _____ Model _____ Price _____
QTY _____ Model _____ Price _____

Equipment Total _____

3. BOOKS I would like to order the following books: (Visit www.rfbd.org/catalog to search online or call RFB&D's member services at **800-221-4792** for shelf number information).

Note: RFB&D's audiobooks are shipped **FREE MATTER** which takes approximately two weeks to arrive. If you would like to pay for UPS Ground shipping, please check (✓) below.

| TITLE | AUTHOR | RFB&D SHELF # | UPS GROUND (Extra Charge) |
|----------|--------|---------------|---------------------------|
| 1. _____ | _____ | _____ | <input type="checkbox"/> |
| 2. _____ | _____ | _____ | <input type="checkbox"/> |
| 3. _____ | _____ | _____ | <input type="checkbox"/> |

List additional books on a separate piece of paper.

4. SHIPPING To calculate shipping, add the following :

Pieces Equipment _____ + # Books Shipped UPS _____ = Total items _____
1-5 items = \$6.50
6-15 items = \$11.50

Shipping Total _____

NOTE: For 16 or more items, or for other shipping services, including overnight, call **800-221-4792**.

Membership Fee Total _____ \$100

Equipment Total _____

Shipping Total _____

Grand Total _____

NOTE: Please make sure ALL sections of your application are fully completed. An incomplete application could result in a delay as we may have to return it to you or your certifying professional. Once we receive a completed application, processing takes up to two weeks, after which you will receive confirmation of your membership.

Thank you for completing RFB&D's Membership Application.

We look forward to serving you!

Additional copies of this application are available at www.rfbd.org/membership_indchoices.htm