Library Membership Application

To: [Library Name]

[Library Address]

[City, State, Zip Code]

[Date]

Dear [Library Staff/Manager's Name],

I am writing to apply for a library membership at [Library Name] with the intent of utilizing the library's resources and services, particularly in relation to my accessibility needs.

My name is [Your Name], and I reside at [Your Address]. I have special accessibility requirements due to [briefly describe your needs, e.g., visual impairment, hearing loss, mobility issues]. To facilitate my library experience, I would appreciate information on available resources such as:

- Accessible materials (e.g., Braille, large print, audiobooks)
- Assistive technologies
- Accessible reading spaces
- Programs tailored for individuals with accessibility needs

I would be grateful if you could guide me through the membership process and inform me of any specific accommodations the library provides. Please let me know if any additional documentation is required.

Thank you for your attention to my application. I look forward to your prompt response.

Sincerely,

[Your Name]

[Your Phone Number]

[Your Email Address]