

Email completed form to director@doverlib.org
or place a printed copy into our book drop



MOVIES – Curbside Curator Questionnaire

* *starred questions must be answered*

***Patron Name** (*please print*):

***Patron Email and/or Phone Number:**

If applicable, what format of movie do you prefer?

(*check as many as you like*)

- DVD Blu-ray

Preferred genres (*select up to three*): *

- | | | |
|-----------------------------------|-------------------------------|------------------------------------|
| <input type="radio"/> Action | <input type="radio"/> Fantasy | <input type="radio"/> Thriller |
| <input type="radio"/> Animated | <input type="radio"/> Horror | <input type="radio"/> Western |
| <input type="radio"/> Comedy | <input type="radio"/> Musical | <input type="radio"/> Other Genre: |
| <input type="radio"/> Documentary | <input type="radio"/> Mystery | _____ |
| <input type="radio"/> Drama | <input type="radio"/> Romance | |

Acceptable movie ratings (*check all that apply*) *

- | | |
|---|---|
| <input type="radio"/> G – <i>General Audiences</i> | <input type="radio"/> PG-13 – <i>Parents Strongly Cautioned</i> |
| <input type="radio"/> PG – <i>Parental Guidance Suggested</i> | <input type="radio"/> R – <i>Restricted</i> |
| | <input type="radio"/> NC-17 – <i>Adults Only</i> |

Please list 3 movies you have enjoyed and why. *

Please list 3 movies you did NOT enjoy and why. *

Anything else you would like to share to help us select the best materials for you?