

**Athol Public Library**  
**Local Author Expo Application**  
**The Expo will be held Oct. 13, 2016, 5:30 – 7:00 p.m.**

**Please fill out form and return to Athol Library by September 20, 2016.**

**Today's Date** \_\_\_\_\_

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Telephone** \_\_\_\_\_

**Email** \_\_\_\_\_

**Please Check All that Apply**

Adult Author     Teen/YA Author     Children's Author     General / All Ages

**Title of your book** \_\_\_\_\_

**What is the price of your book?** \_\_\_\_\_

**Would you like to do a 2 -5 minute reading or book talk?**     Yes     No

**Below please give us a brief summary of your book.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I agree to donate 5% of sales made at the Expo to the Friends of the Athol Public Library. I understand that I, as the author must be present.**

\_\_\_\_\_ **Signature**

**Authors will be chosen through a jury process.**  
**Thank you for your interest. We will be in touch soon!**