

Friends of the Thomas Branigan Memorial Library

**CELEBRATE AUTHORS APPLICATION FORM 2017**

Author's Name\_\_\_\_\_

Title of Book\_\_\_\_\_

Genre: Non-fiction/Fiction/Poetry/Short Story/Children's Literature (circle one)

Other (explain\_\_\_\_\_

Publisher/Year Published\_\_\_\_\_

Author's e-mail address\_\_\_\_\_

Author's phone number Home\_\_\_\_\_ Cell\_\_\_\_\_

Please provide a synopsis of your book, perhaps from the book jacket or the back cover of the book so we know a little bit about the book.

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Return completed form to Sue Fletcher at [sjfletch1940@yahoo.com](mailto:sjfletch1940@yahoo.com).