Friends of the Thomas Branigan Memorial Library

CELEBRATE AUTHORS APPLICATION FORM 2018

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.

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