Local Author Submission Form

Please fill out and sign this required form for your book to be considered for the Local Author Collection. Parental or guardian consent is required if the author is under the age of 18. Submit this form along with a donated copy of your book to Winter Park Library or send to:

Winter Park Library

1052 W. Morse Boulevard Winter Park, FL 32789

Title of book:	Author:			
Publisher:	Publication Date:			
ISBN:	Content (check one): Fiction Non-fiction			
Audience (check one): Adult Juvenile Yo	oung Adult			
Genre:	_			
Address:				
Library Card Number:	_			
Phone:	_			
Email:	·			
Please provide a very brief (1-2 sentences) summary of your book:				

If available, please attach professional reviews or critiques of your book.

Seneral Rules Local authors must reside in the city limits of Winter Park, Florida. Authors must submit their book with the completed Local Author Submission form to the Winter Par Library or send to the address above for review. See Local Author Collection Guidelines for review criteria. The reviewed copy will not be returned. The author represents and warrants full ownership and/or legal rights to publish all material in this book. Submission of this form does not guarantee selection. My signature below indicates that I have read, understood, and agreed to abide by the General Rules of the Local Author Collection Agreement. Author Signature	For w	orks of non-fiction, specify credentials or a description of your ex	pertise in the subject area:
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		-	to abide by the General Rules
Parent/Guardian Signature Date	Autho	or Signature	Date
	Paren	t/Guardian Signature	Date