

Nevins Memorial Local/Regional Author Submission Form

Please submit this completed form along with your material for consideration. Submission of this form implies your agreement to the above guidelines.

Please note: If you are requesting that the library purchase this item please fill out this form to the best of your ability. Complete information will help with your request.

Circle One:	I am donating material	OR	requesting a libra	y purchase	
Name:					
Mailing Address:					
Phone Number:					
Email (Reminder:	this will be our primary meth	nod of contac	t regarding your sub	mission):	
	: (please circle one) Book				
Title of Material:					
Genre:					
Intended Audien	ce: (please circle one)				
Adult Fiction	Adult Non-Fiction	า	Children's	Teens	

NEVINS LIBRARY

GROWING COMMUNITY

If your material is being considered for the Non-Fiction Collection, please include a list of your professional credentials or expertise in the area (Including this information will aid in our review process):

If your material has been reviewed or covered in any publications, please list them below: (If you are requesting a library purchase, please note in this box if the author or material has a connection to the Merrimack Valley)

If your material has Cataloging in Publication Data (CIP), please include it below (Including this information will aid the cataloging process if your material is chosen for addition to the collection):

Materials may be submitted directly to library staff during open hours or mailed to:

Local/Self-Published Author Submission c/o Nevins Memorial Library 305 Broadway Methuen, MA 01844