



AUTHORS' BOOK SIGNING REQUEST FORM

(Mail, fax or email forms and return to ASALH Headquarters with \$25 REGISTRATION FEE by July 31, 2007)

Author Information

Prefix _____ First Name _____ M.I. _____

Last Name _____ Suffix _____

Address _____

City _____ State _____

Zip _____ Email _____

Home () _____ - _____ Cell () _____ - _____

Work () _____ - _____ Fax () _____ - _____

Website _____

Primary Contact Person (if different from author) _____

Please attach a list of additional titles, publisher information and how many copies you intend to bring of your publications. **Please note:** ASALH will not assume responsibility for the transportation of publications to and from book signing location at the time of the event and any damages incurred herewith.

I, (please print) _____, certify that that the above information is complete and accurate.

X _____ Date _____

Book Information

Title 1: _____

Brief Description: _____

Copyright Year: _____

Copies You Intend to Bring: _____

Title 2: _____

Brief Description: _____

Copyright Year: _____

Copies You Intend to Bring: _____

Title 3: _____

Brief Description: _____

Copyright Year: _____

Copies You Intend to Bring: _____

Publisher Information

Publishing Co 1: _____

Contact Person: _____

Address _____

City _____ State _____

Zip _____ Email _____

Home () _____ - _____ Cell () _____ - _____

Work () _____ - _____ Fax () _____ - _____

Website _____

Publishing Co 2: _____

Contact Person: _____

Address _____

City _____ State _____

Zip _____ Email _____

Home () _____ - _____ Cell () _____ - _____

Work () _____ - _____ Fax () _____ - _____

Website _____

Publishing Co 3: _____

Contact Person: _____

Address _____

City _____ State _____

Zip _____ Email _____

Home () _____ - _____ Cell () _____ - _____

Work () _____ - _____ Fax () _____ - _____

Website _____

Completed Applications Require ALL of the Following:

- | | |
|---|---|
| <p>Completed Request Form (with additional pages, if necessary)</p> <p>Registration Fee of \$25.00 (per applicant)</p> <p>Copy(-ies) of the book(s) you intend to sell at the Book Signing.
(Will be returned if you are NOT accepted for event.)</p> <p>Name of Volunteer attending to support the sale of your book(s) (max. 1)</p> | <p>Method of Payment: (circle one) Cash / Check / Visa / MasterCard Total \$ _____</p> <p>Credit Card Number: _____ Exp. ____ / ____</p> <p>Name as it Appears on Card (if different from above): _____</p> <p>Billing Address (if different from above): _____</p> |
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