



Wells County Public Library

Local Author Night

Thursday, October 17: 6:00-8:00 pm

* Afterhours Networking Party for Authors 8:00-9:00 pm

AUTHOR SIGN-UP FORMS





About the Local Author Night

The Wells County Public Library holds a Local Author Night every other year in October.

Who can participate:

Any author (traditionally published or self-published) that lives in Indiana or western Ohio.

What is it:

Authors will get a booth in the Main Library concourse area for the event. This will be an informal event where attendees can wander through the booths, chat with the authors, and purchase books. Please bring books to sell, any handouts or giveaways, and items to decorate a booth. Authors will be split up by genre, but please respect the event is open to all ages to attend. The library will be offering a scavenger hunt activity for people to visit the tables and get a stamp to encourage attendees to visit more booths.

We want to use this event to promote reading and have a celebration of all kinds of books. For this reason, we strongly encourage all participants to think about having an activity at your table as well. This was a successful component of our 2015 and 2017 events and we feel it added a lot to the event. Random winners from the scavenger hunt will receive your donated books (if we already have the item in our Local Author Collection), so no need to do a giveaway at your booth.

Possible suggestions for activities at your table include:

- A coloring station where kids or adults could color a bookmark
- Showing a documentary related to a topic in your book
- Having a word search or photo find (if your book is a mystery)
- A craft of some kind
- Maybe a handout of recipes featured in your book or info about the time period (the possibilities are endless)
- Or an activity related to whatever theme is presented in your book

We also encourage you to sign up for “stage” time to do a 5-minute presentation or reading. These will be in an area off to the side of the author booths, and we are hoping people will sit to enjoy several at a time, starting at 7 pm. We will have a TV or projector in the area with a computer if you would like to project anything onto a screen, but please give us a heads up if you’d need this. Presentation or reading just needs to be appropriate for all ages! Please note it on your Author Registration Form that you’d like a reading time and we will schedule a time for you.

Event date and time:

Thursday, October 17 from 6-8 pm at the Main Library (200 West Washington Street, Bluffton, IN 46714).

Authors need to stay for the entire time. We also invite you to an Afterhours Networking Party for authors from 8-9 pm where you can mingle, meet other authors, and enjoy refreshments. You are free to bring a guest to the networking party.

Cost:

FREE to participate. Authors will not be given a stipend or travel reimbursements. They must make all their own arrangements to attend the event. Authors must also be willing to donate one of their books to participate. This book will be added to the library’s Local Author Collection and if we already own a copy, then the book will be used in a drawing for those that attend the Local Author Night as part of a scavenger hunt activity to encourage attendees to visit everyone’s booths. Send or drop off books (as well as the Author Registration Form and Local Author Collection Form) by Sept. 30 deadline.

Questions?:

Please direct questions about the event to Emily Marshall at the library (emarshall@wellscolibrary.org or 260-824-1612).

Local Author Night - Author Registration Form

Registration deadline: **Monday, September 30** if you want to be included in publicity materials.

Name: _____ Pen Name: _____

Address: _____

Phone: _____ Email: _____

Book Title (s): _____ Year Published: _____

_____ Year Published: _____

_____ Year Published: _____

_____ Year Published: _____

Book Audience: ☐ Children ☐ Teens ☐ Adults (if multiple—please list with books above or attach a booklist)

Book Genres: ☐ Fiction ☐ Non-Fiction (if multiple—please list with books above or attach a booklist)

Activity at your Booth (This is not required, but encouraged. See suggestions on the previous page.) _____

Author Bio (to be included in publicity—*limit 500 characters*): _____

Website Address: _____

How many tables will you need for the Local Author Night? (must bring your own tablecloths for the table):

☐ 1 - 5 or 6 ft. table ☐ I can share either a 5 or 6 ft. table with another author

Do you need electricity at your table? (must provide your own extension cord): ☐ yes ☐ no

Would you like a 5-minute time slot to read from your book or present on our “stage” (must be appropriate for all ages) ☐ yes ☐ no

Will you be attending our Afterhours Networking Party (8-9 pm) for authors/their guests (chat with other authors) ☐ yes ☐ no

Please send all the necessary information to the Main Library by Sept. 30 to reserve your spot:

1.) Author Registration Form 2.) One donated book

3.) A completed Local Author Collection Form for the book you are donating.

If we already have a copy of the book you are donating in our Local Author Collection,
then the book will be used for giveaways during the Local Author Night.

Authors should receive a confirmation within 2 weeks of receiving and get more information prior to the event.

Email Emily Marshall at emarshall@wellscolibrary.org or call her at 260-824-1612 for more info.



Local Author Collection Form

To support, encourage, and foster access to local talent, Wells County Public Library has a **Local Author Collection**. This collection features donated books and music from local authors and artists.

Items included in the **Local Author Collection** must meet the following guidelines:

- At least one copy of the material must be donated to WCPL.
- Donated materials become property of WCPL and subject to WCPL's collection management policy.
- Material content must be consistent with the library standards.
- Donated items which do not circulate regularly may be withdrawn from the collection as space dictates.
- Regardless of genre, all items in this collection will be labeled as "LOCAL" and include the name of the author or musician/band.

To donate materials for this collection, please complete this submission form and include it with the donated item(s). Your copy of this completed form may be used as a tax deductible receipt.

Donations should be clearly marked "Local Author" and may be taken to any WCPL branch or mailed to Wells County Public Library, 200 W. Washington Street, Bluffton, IN 46714.

Donor's Name/s: _____

Street Address: _____

Phone: _____ E-mail: _____

Website: _____

I am making the following donation to WCPL's Local Author Collection:

_____ (# of copies) of a ☐ Book, ☐ CD

Author or Musician/Band: _____

Title: _____

Publisher or Recording Studio: _____

Publisher's City & State: _____ Publication or Recording Date: _____

Brief description: _____

_____ Genre: _____

Where item is available for purchase: _____

Retail price for each item: _____

Would you like to receive WCPL's eNewsletter at the email address above to learn about programs and services such as the Local Author Collection. ☐ Yes ☐ No